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# ORAL HYGIENE

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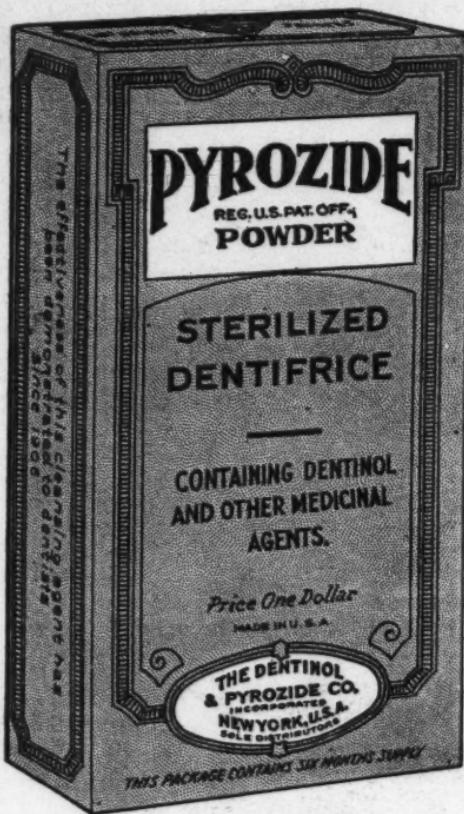
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MARCH  
1929

MAR 11 1929



—and note the results!



Recommend Pyrozide Powder for at least ONE of the daily brushings of the gums and teeth each day, no matter what dentifrice is regularly employed.

Patients will soon appreciate the sensation of gum firmness and mouth cleanliness that is experienced in the use of this medicated powder.

## PYROZIDE POWDER

Removes mucoid deposits.

Reduces gum irritation.

Stimulates blood circulation in the gums.

Keeps the gums firm.

Cleans the teeth better.

## FREE SAMPLES COUPON

THE DENTINOL & PYROZIDE CO., Sole Distributors  
1480 Broadway, New York, N. Y.

O.H.

Please send FREE SAMPLES PYROZIDE POWDER for distribution to patients.

Name ..... D. D. S.

Street .....

City and State .....

S.R. 2+%

The LABORATORIES of THE RIXO COMPANY Announce a Pleasant, Effective and Extremely Convenient Technique for the Application of Sodium Ricinoleate in a Cooperative Treatment of Pyorrhea, Vincent's Angina, and other Mouth Infections.

A Specific for Such Organisms as Streptococcus, Pneumococcus, Spirilla Vincenti and B. Fusiformis.

Each month this space will present a consideration of a new cooperative treatment of pyorrhea of vital interest to the profession.

Frankly, we advise you to make your own clinical test. Upon receipt of your professional card, THE RIXO COMPANY will be pleased to send you the quantity of this valuable medicament required for a ten-day treatment and a quantity for your own examination.

THE RIXO COMPANY

30 E. Kinzie St., Chicago, Ill.

Each Month This Space Will Present a Consideration of a New Cooperative Treatment of Pyorrhea of Vital Interest to the Profession.

# The Business Manager's CORNER

By Mass

March, 1929 No. 92



It takes a brave man to use a guest towel.

Add to Modern Maladies: cigarette-lighter thumb.

Some front-seat drivers *need* back-seat drivers.

It seems hard to get this month's CORNER started. So far the continuity is terrible. Maybe Denny Beattie is right. He says, "You've been getting by with your damn CORNER for seven years or so because you only sent it to us boys in the trade; now that you are printing it in all editions, your inferiority complex will get violent because you'll be figuring all the time that dentists are reading your stuff and hissing you. And, besides, dentists aren't interested in magazine shop-talk."

But, Denny, dentists are people, aren't they? You used to be one yourself before you started sales managing for Jess Jelenko and you aren't so hard to get along with.

You're right about the inferiority complex though,

# HEIDBRINK

**-The safe  
machine that  
provides  
for Carbon  
Dioxide!**

If it is necessary to help your patients ride through smoothly and safely, simply attach a Heidbrink Carbon Dioxide Synergist Attachment and administer any quantity of Carbon Dioxide as, and when, desired.

That's how quick, safe, and easy Heidbrink's superior engineering permits you to adopt the new developments in anesthesia.

Use Carbon Dioxide now—with Heidbrink. It will help solve many of your difficult problems.

We'll Send You Details  
Promptly—Free.



**Creo-Stop and Creo-Seal**—New, novel, non-irritating. Antiseptic, dentine desensitizer in stopping form—absolutely safe to the pulp. CREO-SEAL makes it moisture proof. Combination \$2.50.

**Heidbrink Mouth Props**—Designed by Heidbrink, these mouth props have rigid indestructible centers and removable, renewable rubber ends. Set \$2.50.

**Heidbrink Bite Blocks**—With soft rubber biting surfaces and vulcanite core. Will not buckle. Three sizes. Set \$2.00.

***The HEIDBRINK COMPANY***  
Minneapolis Minnesota U.S.A.

but it couldn't get very much more violent. If I were to be psycho-analyzed they'd find, I suppose, that I use the perpendicular pronoun so much in this department and yibble so much about my own affairs because of a sort of subconscious resistance to the humble complex. For I am a very meek guy.

And very easily dominated as many of the local life insurance men know.

Only the other afternoon a stranger walked in here and introduced himself as one who had chanced to pick up *ORAL HYGIENE* in a dentist's office and read the *CORNER*. "Ah! One of my public!" I thought happily, smoothing my hair and adjusting my necktie and trying to look literary.

"Uh—," the stranger continued, "Your *CORNER* inspired me to come over here to talk to you about the—uh—New York Life Insurance Company."

I resisted *that* one somehow but I've yessed myself into so many policies that it's a wonder my wife doesn't shoot me and enjoy a little affluence for a change.

And Jack Downes, when I told him about it, expressed more or less polite surprise. He said, "But a fellow who writes the sort of stuff you do is liable to be killed any minute; you are a hell of a risk for an insurance company."

It is people like Denny and Jack who keep my inferiority complex oiled up.

My friend Doctor Larry Dunham devotes his time to advertising-managing the Dentists' Supply Company, business-managing *The Dental Digest* and breaking ligaments in his legs. He does all three regularly. The last time he snapped a ligament was out on the golf course when he caught up with the

(Continued on Page 490)

for pain  
and sleeplessness



To be certain that you are  
employing the best remedy  
for nervousness, pain and pain  
insomnia use the non-narcotic  
**ALLONAL**



**DOSAGE:**

**For Nervousness**

1 to 2 tablets a day

**For Pain**

2 tablets are usually  
sufficient

**For Sleep**

1 to 2 tablets immediately  
upon retiring

\*A trial supply sent to  
dentists on request

**both before and after the chair**

**19 CLIFF STREET**

**The Hoffmann-La Roche Chemical Works**  
Makers of Medicines of Rare Quality  
**NEW YORK, N. Y.**

year's ligament-snapping by leaping across a little stream, forgetful of personal poundage.

Which makes me recollect the letter Larry wrote a little while ago in which he said:

"This thing of advertising in ORAL HYGIENE reminds me of some of those advertisements of Smith Brothers' Cough Drops in which a weak-minded gent is shown bucking a blizzard in his beevedees. Under 'Smith Brothers' Cough Drops' is the snappy caption, 'It's just as silly to be without them.'

"In all sincerity, I can't imagine anyone in the dental trade silly enough to do without ORAL HYGIENE."

I may have an inferiority complex but ORAL HYGIENE has none, and admires itself at every opportunity.

Last year was the biggest in ORAL HYGIENE's history.

This year, so far, has passed all the previous eighteen. Last year O.H. printed more advertising than ever before, and, consequently, more text, and could spend more money on editorial features. Remember the way meetings were covered, for example?

This month there's a 25-page article on the Chicago Dental Society's mid-winter clinic, illustrated with a flock of photographs. ORAL HYGIENE originated the idea of covering these big meetings completely and has so far printed the only reports of this sort appearing in the dental press. The cost of covering a very large meeting—maintaining headquarters, railroad and hotel bills, reporter's salary, photo-



## Easy For You . . And The Patient, Too!

*An Anacin enthusiast  
discovers a new use for  
Dentistry's safe sedative*

**FIFTEEN MINUTES**  
before you administer  
Novocain, have your as-  
sistant give the patient  
two Anacin tablets. You  
will notice a marked dif-  
ference in the ease with  
which the operation is  
performed.

Once you have tested the  
plan yourself you will  
make it a part of your as-  
sistant's regular routine.

**And, of course, Anacin should also be  
given following the operation, to head  
off Post-Operative Pain.**

We offer you a Free Service of Dispensing Envelopes throughout the year. Each envelope gives full instructions on care of the mouth; each contains 2 tablets.

THE ANACIN COMPANY, 30 E. Kinzie St., Chicago, Ill.

Send carton of Anacin Dispensing Envelopes

I can use 35 envelopes in my practice every \_\_\_\_\_ weeks. Please place me on your  
Free Service Mailing Schedule.

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

graphs, cuts and wotnot—is in the neighborhood of a thousand dollars; smaller meetings run in proportion.

A new feature, on the way, is a series of authoritative articles on investment pitfalls. The profession is regularly victimized and these articles are being prepared with the idea of providing readers with information that will aid them in spotting undesirable "opportunities." The art-work for the series is done and Stuart Stanley, manager of our New York office, who has been gathering data for the articles, is working with Frank Brock, of the Better Business Bureau, who is writing them for us.

At this moment, as these lines of the March CORNER are typed on this little Corona, I don't know for sure, but I have hopes that the first article will be ready for this number.

---

And now comes Miss Leach, of Anacin, with a clipping from a Terre Haute newspaper, sent by Dr. L. Berlau. The clipping relates that Dr. V. K. Reeve, of Bicknell, Ind., gulped Anacin to relieve nervous strain during a golf tournament—and won the cup.

According to the clipping, "a friend had recommended gunpowder touched to the tongue as a good nerve quieter, so there was also half a small-gauge shotgun shell filled with that in his knicker pocket as an added protection."

And Paul Cardinal, of Hoffman-LaRoche, read the last CORNER, about my Mayo trip, and invites me to visit *their* guinea-pig zoo, God forbid.

---

And the CORNER ends, these last lines being typed a bit after sunset, or what passes for sunset in Pittsburgh.

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Your Dealer Sells Ney Golds

# Waking Up!

• • • THE dental profession are awakening from the 22-karat inlay habit. Everywhere dentists are finding that NEY-ORO A-1 produces better inlays than 22-karat gold. • • •



**Tested by Bureau of Standards Methods**

**THE J. M. NEY COMPANY**  
71 Elm Street • 55 E. Washington St.  
HARTFORD • CHICAGO

# ORAL HYGIENE

Registered in U.S. Patent Office—Registered Trade Mark, Great Britain

## *A Journal for Dentists*

NINETEENTH YEAR

MARCH 1929

VOL. 19, No. 3



Wide World Photo.

Dr. Adelbert Fernald, of Boston, found this tusk about 160 miles north of the Yukon in Alaska. It measures eleven feet, two inches from tip to tip and weighs nearly three hundred pounds. George F. Egan of New York City, and Maurice F. Draye of Forest Hills, L. I., are holding the huge tusk which now rests in the Harvard Dental School Museum at Boston.

# It Was A Wonderf

THE sixty-fifth session of the Chicago Dental Society came and went between the fourteenth and sixteenth of January inclusive. The daily papers announced it as having between 12,000 and 15,000 in attendance and referred to it as the biggest in its history.

It was likewise said to have had more registrants on its roster than the national, except when that body met in Chicago. It is evident that Chicago succeeds by virtue of its location, to some degree, as a famous Englishman said America won the Revolutionary War. The actual attendance was somewhat less than 8,000. *Haec fabula docet.*

#### THE WGH

The meeting was held in the Stevens Hotel, the world's greatest according to its own statement on the program cover. To emphasize the magnitude of the hostelry it has been figured that a bath taken every Saturday night in a different tub would require fifty-seven years and seven months to make a circuit of its 3,000 rooms.

Elsewhere it has been calculated how far around the globe its beds would reach if placed end to end and similar astonishments with regard to the bed clothes, table linens, dishes and foods. All this will be commonplace in a short while, Chicago

is growing so rapidly. But at present it is deemed important.

#### 125 EXHIBITORS

Inside the cover is the announcement that the biggest manufacturers' exhibit ever made would be made. This is in the president's address of welcome. One hundred and twenty-five exhibitors had space and still others had perambulatory freedom to display their personal interests, the products of their genius.

Doubtless, the program might readily have been said to be the greatest ever presented if the contributions were enumerated without deleting the repetitions of subjects. Over four hundred items entered into the mighty composite to prove to the world that dentistry bids for a place among the colossi of modern times.

#### BIGGER AND BIGGER

To say that the size of the convention, the size of the hotel, the extent of the exhibits are not savory observations is misleading. The implication is that bigger denotes better, or conversely to be better a thing must be bigger. There is something in rhyme and alliteration that is appealing and convincing.

That practise makes perfect is obviously untrue, but the epigram will live on the strength of its glibness. But it is an arresting conjecture whether bigness and betterness will al-

rf how

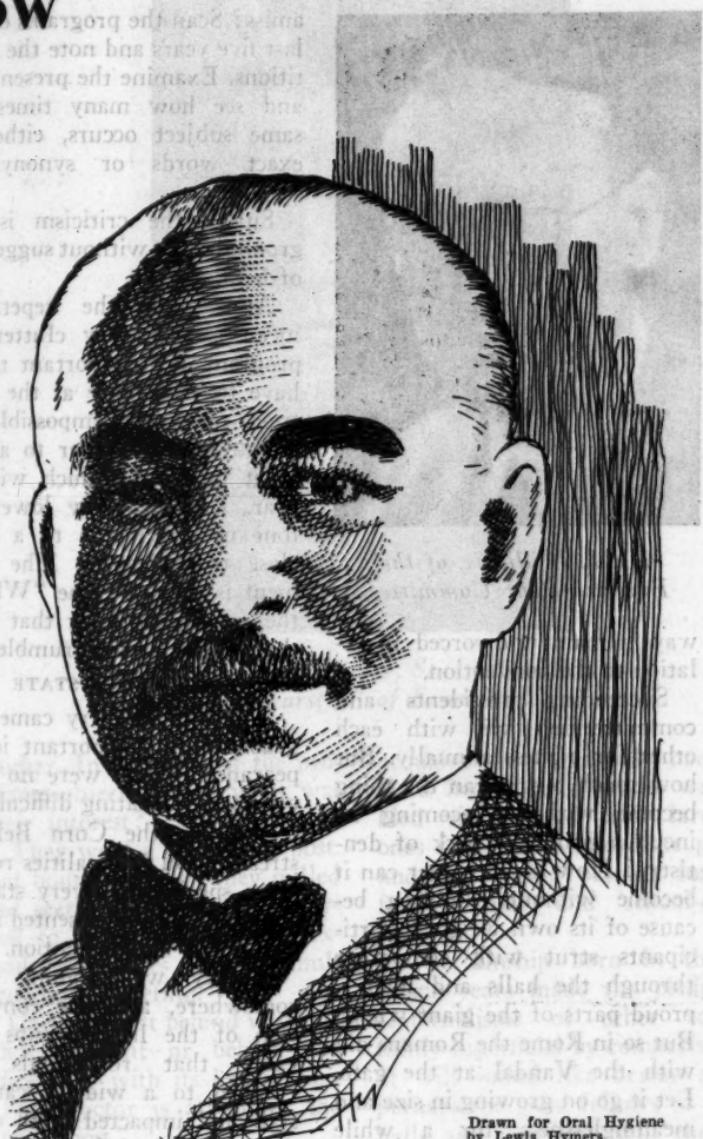
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Drawn for Oral Hygiene  
by Lewis Hymers.

*Dr. Louis E. Jelinek, President of the Chicago Dental Society, can  
be proud of the convention.*



*Dr. I. Williams, of the Entertainment Committee.*

ways remain undivorced in relation to the convention.

Succeeding presidents and committeemen vie with each other for bigness annually. But how much bigger can the thing become without becoming an incubus upon the back of dentistry? How much bigger can it become without tumbling because of its own weight? Participants strut with composure through the halls and lobbies, proud parts of the giant whole. But so in Rome the Romans did with the Vandal at the gate. Let it go on growing in size and meaninglessness for a while longer and what is to happen? Well—just so it does not happen while I am president!

Possibly a trifle of criticism might be charged to the sentences above. Is it unpardonably

amiss? Scan the programs of the last five years and note the repetitions. Examine the present one and see how many times the same subject occurs, either in exact words or synonymous words.

Surely the criticism is not groundless or without suggestion of help.

And what the repetitions mean is that they clutter the program until important things have to take place at the same time, making it impossible for an interested listener to attend what he would much wish to hear. Likewise they lower the tone of the whole to a point close to disrespect. The comment is sure to come "What is the use to go?" At that point the mass begins to crumble.

#### FROM EVERY STATE

To this, dentistry came well groomed and important in appearance. There were no anxious faces indicating difficult collections in the Corn Belt, or stress of toil in localities remote from specialists. Every state in the union was represented in the register of the convention.

Money was coming from somewhere, and the conversation of the little groups indicated that root-canals succumbed to a widely scattered skill and impacted teeth of all dimensions and locations were very generally being removed.

#### A LAYMAN WONDERS

To a layman, unsophisticated and wandering free, the wonder was what brought them



*Dr. George B. Winter, St. Louis, Mo.,  
the "Thurston" of Exodontia.*

thither. In the light of the program subject-matter, what was their interest?

They were a gregarious host. For hours and days they milled and seethed, wandered or hurried to the impulse, hands extended and faces aglow in multitudinous greeting.

Care was left behind with the office assistant or behind the office door with its legend that "The Doctor is attending the Convention."

#### MAGIC KINSHIP

To the onlooker this was the best part of the convention and occasionally those words were wafted this way and that as old

acquaintances grasped hands. Bald heads, gray heads, wrinkled visages and well larded ones forgot the immediate past and the urging present for a farther past and school-day joys.

The kinship born in those magic years made the pledged fraternalisms of other sorts thinly superficial by comparison. It will sound like heresy and perhaps the good fellows of the halls and stairways will themselves deny it, but this resurrected *camraderie* justified the convention. That alone would send them back better dentists, better parents, better citizens.



*Dr. C. Miller untangled exhibitors' problems.*

Well-deserved compliments were passed over banquet tables and lecterns for the giant organization. The chairmen of the committees, from the master group to the lowliest, were granted a full measure of praise. Such work as was done deserves a reward.

Theirs was a tremendous undertaking. To get a concept of it one need only recall the numbers that were lost en route to this room or that in the laby-

rinthian hotel and realize that no two meetings ever tried to convene at the same time in the same room.

#### A PERFECT MACHINE

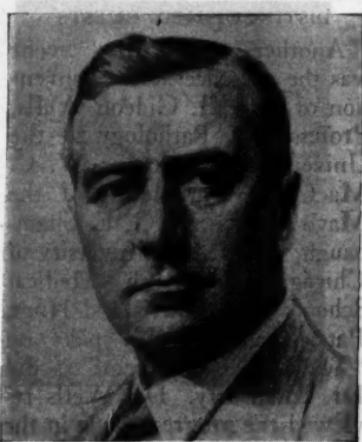
And not once was a room found chairless or speakerless at an appointed hour as has happened before. Not a lantern that did not work, not a microscope that was not in focus, not a reader who had not read his paper at least once before ap-

pearing in his place of prominence. The great machine was mechanized perfectly and operated beyond criticism.

#### THE BANQUET ORATOR

There were high spots in the convention. Some were not dentistry and some were so only in a contributory way. Some committee man chose with astuteness when he suggested Dr. Bridges for the banquet orator. Having such a speaker is self-complimentary to the organization. Such a man and such an address as he always gives added amazingly to the stature of the professional ideal. Many will credit him with being the strongest thinker on the Chicago Sunday platform.

Dr. Bridges is a great scholar. His every address attests it and his books are library treasures.



*Dr. Horace W. Bridges,  
Lecturer, of the Chicago  
Ethical Society.*

His subject was "The Art of Renewing One's Youth." His thesis was that the mind of a man need not grow old because the body ages. He illustrated the resiliency, the retentiveness, the generativeness, the responsiveness of the mind irrespective of the years.

But someone was thoughtless of the speaker. Perhaps dining and dancing are more important than intellectual pabula, but it was cruel to make him speak to disparate acres of humanity, one at each end of the room with a vacant acre immediately before him. Despite the amplifier the handicap must have distressed him and the consciousness too that in the distance, unseen to him, were hidden discourtesies that his presence dispels when he commands at shorter range.



Oral Hygiene Photo.

*Dr. R. O. Schlosser,  
Northwestern University.*

## DISTINGUISHED GUESTS

Another noteworthy event was the presence at the convention of Drs. H. Gideon Wells, Professor of Pathology at the University of Chicago; W. C. MacCarty, Pathologist of the Mayo Clinic, and G. E. Shambaugh, also of the University of Chicago and Rush Medical School; Loyal Davis and Hugh Patrick. Dr. Wells spoke on "The Cancer Problem" as did Dr. MacCarty. Dr. Wells reviewed the progress made in the research upon cancer and gave statistics concerning its incidence.

Dr. Shambaugh, who is perhaps the foremost authority



Oral Hygiene Photo.

Dr. R. Orban, Chicago.



Dr. W. I. McNeil,  
Chairman, Clinic Committee.

upon ear, nose and throat affections, spoke on "Infection of the Maxillary Sinus." Dr. Davis spoke on "Trigeminal Neuralgia," and Dr. Patrick succeeded him on the same theme.

The subjects of these men, thoroughly handled as they were, do not denote the *raison d'être* of the noteworthiness mentioned, so much as the fact of their presence.

Not long ago the relation of dentistry to medicine was a much discussed question. Much was said and written concerning the intimacy of the relationship. Many advisers would have dentistry related to medicine as is laryngology or ear, nose and throat. That is, they would have dentistry be a specialty of medicine as they are.

Others could not see how dentistry with its bulk of mechanics could qualify for such a

union. Then came the requirement of two years' preparatory schooling for dentistry and an increase of basis medical subjects in the dental curriculum. The terms *healing art* and *health service* were frequent guests to the vocabulary of after-dinner speakers, but something of a gulf persisted between the two. In a few instances dentists acquired medical degrees and immediately deleted dentistry from their practices and confined themselves to the soft tissues of the mouth and mere extracting.

Proponents of the plan took fright. A dark question overhung the problem.

If the medically trained dentist favored surgery so commonly, *who* would do the dentistry?

Not quite convinced in its own mind as to the kinship of the two, dentistry inscribes over its own temple doors the legend **MEDICAL AND DENTAL ARTS BUILDING.**

That the two should come



Oral Hygiene Photo.

*Dr. Henry G. Lee, Chairman,  
Credentials Committee*

close together is evidenced repeatedly by the authorized extractions that patients bring from their medical advisers to their dentists and the dispute that takes place at the dental chair. An outgrowth from this, a speaker in the convention dared suggest that medical men ought to know a little more of dentistry and dental men a little more of medicine.

#### THE STEPCHILD?

The statement, a bit moth-eaten in school circles, intrigued a WGN reporter and it got a prominent headline. Suffice it to say that inviting medical men to dental programs is illuminating and perhaps the courtesy will be returned when dentistry has a proportionate gift.

In a recent writing dentistry was referred to as a stepchild of medicine, a relationship that might be close or distant according to the ideals of the contract-



Oral Hygiene Photo.

*Dr. W. H. Kubacki, Secretary,  
Partial Dentures Section.*



*Dr. Harris W. McClain,  
Chairman, General Arrangements Committee.*

ing parent—and the writer was a dentist. A suspicion lingered after reading the article that the writer was dubious of the happiness of the child, or that it would ever be more closely related.

With these men present surgery stood out strongly on the program. The committee sensed clearly what should and would be of absorbing interest to their confreres and make a powerful appeal to general interest.

To get Loyal Davis to pre-

sent "The Treatment of Trigeminal Neuralgia" with Dr. Hugh Patrick to discuss it and Dr. G. E. Shambaugh to present "Infection of the Maxillary Sinus" was a real acquisition. In tribute to Dr. Davis, Dr. Patrick said, "There are five men in America capable of doing brain surgery: Cushing of Boston, Frazer of Philadelphia, Peet of Ann Arbor, Adson of the Mayo Clinic, and Loyal Davis of Chicago."

## LOOKING BACKWARD

To give point to the compliment let us recall that in 1884 Rilroth was injecting osmic acid for the control of pain in tri-facial neuralgia; in 1900 Schlosser began to use 80 per cent alcohol instead of osmic acid and in 1907 reported 209 cases. In that same year Dr. Patrick introduced the method in America. Behind the compliment then were twenty-two years of experience in treating this terrible malady.

A quotation or two from Dr. Shambaugh's address will serve to illustrate the grasp of the subject he maintains and perhaps be an emollient to those who live in dread of the proximity of the antrum to the teeth or dream of torturing operations whenever it is disturbed:

"The rhinologist has found that the incidence of antrum infection of dental origin is rare when compared with infections



Oral Hygiene Photo.

*Dr. Theodor B. Beust,  
University of Louisville*

arising from extension of disease from the nasal passage.

"I am of the conviction that chronic sinus disease is a much less important factor in producing systemic infection than are either the teeth or the tonsils. The incidence of a demonstrable sinus infection occurring in connection with systemic disease appears to be extremely rare.

## THE ANTRUM

"Occasionally the dentist when extracting an upper molar tooth discovers that the floor of the antrum has been broken through in the process of extraction. This mishap is not one that could necessarily have been



Oral Hygiene Photo.

*Dr. White helped Dr. Dan Cameron entertain the press.*



Oral Hygiene Photo.

*Dr. J. Roy Blayney,  
University of Illinois.*

avoided by any amount of care, nor is it likely to be a serious matter. Where there is no infection about the dental roots an infection of the antrum is not likely to occur, provided the condition is left quite alone and no efforts are made either to probe the sinus or to irrigate the cavity. A more unusual mishap is when the loosened molar is lost in the sinus. This mishap should not be taken too seriously. It hardly warrants undertaking an operation to salvage the lost tooth for a loose tooth in the cavity of the antrum can not be the source of any serious trouble. It is not likely to be a

factor either in producing or in prolonging sinus infection.

"I would emphasize that in the proper treatment of an acute antrum infection there is rarely, if indeed ever an indication for radical surgical measures."

There is profound comfort in words like these from one who has given a lifetime of study to the ear, nose, throat and the paranasal sinuses.

Fitted into a scheme, as perhaps no one else in America or the world would, was Dr. George Winter discussing "The Management of the Impacted Mandibular Third Molar." In knowledge and skill he stands indisputably alone in this consideration. It is a unique thing to conceive the removal of one type of tooth as deserving a lifetime of study.

What possibly could have been the man's dream when he began it?

Did he look down the years and say "One ought to be able to remove such teeth in fractions of a minute. It is possible. Only sufficient knowledge of the tooth position of the bone structure over it and proper instrumentation is necessary to accomplish it." But history has told the tale and an epochal book, a monumental thing from the hands of this man.

Closely allied to surgery in its transforming power, in its bestowal to mankind comes orthodontia. Its program was built for a specific purpose as the titles indicate and persons par-

ticularly equipped to discuss them were chosen.

What they said of arches, labial and ribbon, of Angle mechanisms and retainers, form the privacies of specialists, but the silent witness of the sequential models, the photographs of half-human faces made beautiful is what stirs the sub-currents in the usual observer. Highly specialized, considerably separated by it from the routine of dentistry these men ply a craft that is well nigh jugglery.

#### "NO FAILURES SHOWN"

They stem the flow of misdirected forces and harness Nature with their wires and bands and arches and make her mend what before she had despoiled. When a wonderment was expressed one of the specialists replied, "We do not show our failures, you know." Neither do surgeons—but still we esteem the triumphs of surgery.

#### THE EXHIBITS

The president said the manu-



*Dr. C. S. Suddrath—vigorous discusser.*

facturers' exhibit would be the largest ever brought together by the society. It was imposing. It was attractive. It was educational. As always its presence was provocative of a half-regret by the idealists. They conceded that "the meeting could not be without them but the savor of commercialism in the sanctuary of professionalism was not wholly palatable. A necessary evil." Mr. Dooley's aphorism that if it is an evil it is not necessary and if it is necessary it is not an evil should be admitted as a sedative. The multitudes swarmed the stands and booths indicative of their interest.

#### "INVASION"?

The idealist has a hard time of it in a world of realities. What virus afflicts the crowding professionals that they encourage wholeheartedly this



Oral Hygiene Photo.

*Dr. J. Norton, Chicago.*



*Dr. John LaDue,  
Full Dentures.*

"commercial invasion"? Somewhere, somehow, the salesman has outstripped the school man and practitioner. Listen to the sales-talk anywhere along the way and note the glibness of it, the persuasiveness of it, the ready reference to mechanical, to technical perfection, to the adaptability, to the necessity of whatever is presented. And note the stammering rejoinders. The listener is beaten at his own game. The manufacturer has seen a need or created one the other has not seen or felt and supplies it—and sells it.

Nor is that all. Suppose we ask what is the professional need of the manufacturer's genius. Fancy dentistry deprived of the aid the manufacturer has brought and brings. How far

short of its present status would American dentistry be with this fancy concrete? How utter would be its helplessness! Would the schools provide the essentials that make the equipment of the modern dental office? Would the dental societies?

Units and engines and cabinets and instrumentation are as essentially a part of a man's fitness as his education. With them unmade, education is handless and footless. The contrivance of the practitioner would fall so short that the disparity represented becomes an equivalent to learning, *materia medica*, health service.

This granted, why the feeling of professional uncleanliness, of peccability because the manufacturer forms part of the common enterprise? Time was when dental students were asked to make instruments in duplication of the sold product primarily to learn names and formulae. The teachers unfailingly did not know how to use a file. What a sorry day if such a thing were a necessity!

#### BARRIER BUILDING

There is place for a wedlock between pure and practical science that has not yet been determined. Knowing the appeal of practical research the pure scientist has been jealous of its intrusive possibilities. He has built barriers around his domain and is trustful of no one who would compromise his ground.

He thinks, and not without

reason, that pure science, searching for truth for its own sake, would suffer if the greedy world came too near and so he would have none of it.

In an Eastern city a university shelters an industrial institute and Sigma Si has cried "Unclean" when that university has asked for a chapter. Still no one would belittle the importance of such institutes.

The manufacturers have been to dentistry real industrial institutes. Professionalism and pure science might find a place where the twain might become one flesh if honest intelligence were brought to bear on the subject. It does seem illogical that the parent should scoff at or be ashamed of the child.

#### COMMON GROUND

And such a child! Huxley in Birmingham, dedicating a school of scientific technology, was not a contradiction of terms, an incongruity, a case of perjury. When we recall that Marconi practicalized the Hertzian waves, that Morse employed the findings of Prof. Henry of Princeton, that the Wright brothers made use of the principles evolved by Langley, it would seem that there should be a pleasant place of meeting.

The foregoing was intended to pertain to the mechanical phase, more than to the medicinal, of the exhibit. But the latter was evidenced with signs and exhibits that made them conspicuous. Most of them flew banners bearing enigmatic mot-



Oral Hygiene Photo.

*Radio speaker—smiling Dr. C. J. Hollister, Harrisburg, Pa.*

toes. To a layman it was a foreign language department, a sort of medicinal esperanto. To attempt an etymological examination of the terms was to sink into despair.

#### NAMES

One was reminded of the clergyman who was asked the meaning of nabisco. The learned man resorted to his Latin and sensed a negative in the first two letters. After deep pondering he concluded it meant "not a biscuit" but could not reconcile the interpretation with the purposes of the manufacturers. He was slain by simplicity. Oranoid, Iteco, Corega, Permafix, Poloris, Ipana, Dentinoid, Tartaroff, Quick, Rem, Vim, et al. But let there be no vilifying interpreted from this. We



Oral Hygiene photo.

*Dr. F. B. Rhobotham, Chicago.*

all signed for them, layman and professional alike. We pocketed them and bagged them and bore them away. We put them in our spray bottles, in our root canals, on our chapped lips or lacerations.

The extraction specialist says, "I will give you a prescription," and the assistant hands the patient a printed form torn from a block of forms provided by some manufacturer, the form printed full of directions and multifold uses save for a space at the top for the Doctor's name and address and at the bottom the classic **R** and a hybrid name of the lotion.

#### A LAYMAN ADMires

When the number of dental laboratories is considered, they were conspicuously absent from the exhibition hall. There were exhibitions of laboratory craft in plenty but more to extol the gold used in the restorations perhaps than the type of dentistry done. Exquisite workmanship abounded and fantastic res-

torations were legion. It is not a layman's province to criticize or exalt the use of the contrivances shown. It is his only to admire and to make comparisons.

Dentures were on display that made a man less loathe to lose his teeth and to make him wonder why he saw so many that are epitomes of ugliness.

#### THE LABS

A weighty responsibility rests upon the man when he selects a laboratory. Do dentists patronize laboratories to so complete an extent? Verily, or there would be fewer of them. And why? Because the practitioner cannot compete with them in the service they give through him to his patients. Despite attempted refutation, despite the pride of birth and caste, the laboratory is kith and kin of the dental office.

One sees a problem looming out of the situation. It reminds one of a caustic comment of an advertising man. A recent graduate applied for work at a "parlor." "What school are you from?" The answer was given. "When is that school going to add us to its teaching staff?" Dentistry grows painfully complex.

#### THE 400 CLINICIANS

The table clinics and lecture demonstrations formed an amazing total, four hundred men and women participating. Although Chicago provided a near half of them committeemen drew from distant places for ability to make

the meeting a success. Men who at home heard the breaking waves of two oceans and the Gulf, as well as others from Dominion centers, brought their findings, their deductions, their technique, their experience. The major divisions of dental science were cored with names of renown.

To be sure many of the names were of those who discussed the key-noter's presentation. In the total they absorbed a lot of the three days with dubious profit.

#### THE DISCUSSERS

If for the time we may forget Mr. Dooley's aphorism they may well be called necessary evils and be thrown open to debate. That they have been so regarded for a long time one has only to go back a half-dozen years to find an editorial in *The Journal of the A.D.A.* that tries to assay the subject.

A vote taken on the issue might show the majority denoting the custom of having a discussion of every paper as a nuisance with a weak minority loathe to let the abomination die. If a man is capable, is well enough equipped to present his life study to an audience, he ought to be spared the humiliation of the possible embarrassments that easily arise when discussion begins.

Discussers often take themselves too seriously and prepare to outdo the leading paper when their chance comes, or, oppositely, do not take the subject seri-



Oral Hygiene Photo.

Dr. George H. Wandel,  
Chicago.

ously enough and so make a meaningless doldrom of their part. Misunderstood data, misinterpreted statements often add to length and confusion of the hour.

#### THE DISCUSSER'S DILEMMA

For the discusser, too, something might well be said. Often he has not had time to read or digest what his predecessor is to present or finds himself unequal to it because of a different interest but nonetheless thinks himself obligated to go through with his obligation. Occasionally the first reader changes views between the despatch of his paper to the discusser and the latter gentleman finds himself in straits when the big moment arrives.

A man well enough versed



*Dr. B. O. Sippy, Chairman,  
Orthodontia Committee.*

in a subject to be asked to major at a meeting and a man big enough in the same line to discuss intelligently the paper given, seldom differ on issues that would concern an average audience. Their differences would occur in a realm that the usual listener would be unable to appreciate and would care nothing about.

Again, certain places had more allurement to them than others, not necessarily because of delinquencies of committeemen but because desired readers or demonstrators were not available or the division did not lend itself to the development of attractive or important data.

#### ABSENTEES

Some departments normally rich in possibility had nothing to present because of apparent inertia or a scattering of energy

on the part of workers in such fields. Likewise, committeemen are frequently hard put to avoid repetition, to accomplish co-ordination, perfect correlation of parts.

Strangely enough, men do not always comply with the requests made of them but make disjointing changes, disconcerting digressions, ill-placed interjections, insist upon the intrusion of their hobbies.

A paper beginning with "I have decided to make a little change in my assignment and instead of talking, etc.," is obviously unfair to the committee. If a potential speaker cannot speak to the subject, if his specialty is not that asked, he should decline the place on the program. Too often men prominent in given fields assume that their ordinary conversation deserves the tribute of listening ears and come prepared only to talk generously and generally; and it is not easy to advise a high and mighty authority. It is to be doubted however that a real student, a scholar of any dimensions, ever does such a thing. But so troubles for program-makers pile up.

#### TAILINGS

A saunter through the table displays disclosed things of intriguing interest. Many of them were the result of careful observation and tiresome practise. But the results of the effort were well worth the time taken to see and hear.

But here too were end-prod-

ucts, tailings, if you please, of dentistry. It was evident that no previous specialization, no recorded preparation was necessary for appearance here. It would have been pitiful to ask a question, cruel to stay too long and appear interested. Somewhere encouragement has been offered too lavishly, persuasion in too great concentration . . . sentimentality blinded someone's eyes to the dignity of the thing being done.

#### HATS

Full denture service and partial denture service made three appearances. This will be acclaimed by many as a major if not the major element of the program. It is a perplexing thing to discuss for any man but apparently no more for the general observer than for the specialists themselves.

But it is of profound interest. Until recently old ladies and little children shared alike in finding no hats on the market that were not grotesque disfigurements and their teeth lacked competent, intelligent treatment. Since grandmother has bobbed her hair she is able to find a hat that keeps her within the range of passable attractiveness and within recent years someone carved attractive teeth for her and dentists learned to set them, or their laboratories learned to do it for them.

Never were artificial dentures made so beautifully — esthetically is the word—as now. The old square, blue- or chalk-white



Oral Hygiene Photo.

*Dr. U. G. Rickert,  
University of Michigan.*

has gone and something approximating human tooth form has come. And the shading is well nigh perfect.

#### THE MODERN TOOTH

Blessings be upon the head of Cadmus, the Phoenicians or whoever it was who developed the modern tooth. It is objected that no one ever saw an aged person with such perfect teeth as we make when Nature has done her best to preserve them.

They are always worn, or perhaps slightly spaced, more richly yellow with time. Even when Time kisses its favorites and passes on, the kiss leaves



*Dr. Kenneth W. Penhale of Chicago, gave a practical demonstration.*

wrinkles, graying hair, browning skin and other marks of its Judas trick. But when the dear old matriarch seeks her third teeth she objects to duplication in these matters; she wants the teeth of her second decade. The dentist cannot be censured too much for that. In spite of anatomical occlusion for the aged, time was when the practise of high cusps was advocated for purposes of occlusion.

The machinery, the engineering of denture construction, is a complicated thing. Once we were taught the art of occluding teeth by dentists of mechanical mentality; now the engineer with a dental quirk has arrived. A loose reading of denture construction technique will show that one must be versed in circles

and secants, curves and tangents, tangents, parabolas and hyperboles, plane and solid geometry and conic sections to traverse the path successfully.

#### THUMB-RULE

Once upon a time a renowned teacher taught a method of wax rim preparation for tooth setting with rule and compass. The process was long and intricate. After the lines were drawn and the curves scribed he would say "Now with the eye you will mark off a line so." And with that any mechanic will tell you the whole tangle of lines and curves collapsed in a mess. That was years ago. There seems to be a parallel between that and this later mechanical operation.

Perchance no engineer of these later days will say comparable words, but the jaws that are to carry the perfected products say them. Physiological function is scarcely mechanical.

Biological arrangement is seldom mathematically accurate. No two condyles alike; no two ramal angles alike, even to the same mandible. No two muscles contracting alike, even on the same jaws. The devices that have sat upon the sure foundation of a complicated articulator now rest upon the uncertain oral ridges. The difference takes the place of the words of the old teacher. The margin of safety for the ingenuities of the prosthodontist is in the adaptability of the living thing that is to carry them.

**ARTICULATORS**

We recall the days when men rode to fame and fortune on the tide of another movement. They laved and tonsured and massaged the teeth at a high price. Today scarcely anything is left of it save an improved technique for cleaning teeth. A manufacturer said, "I am not interested in articulators *per se*; I know what you dentists do with them. They are a means of displaying the virtues of our tooth molds. We are interested in selling the teeth."

A speaker in this section framed a phrase—may it make him as immortal as the "safe for democracy" or "back to normalcy" made two others—"prosthetic psychology." It is evident beyond disproof that there is such a thing.

**FLOATING DOWN THE  
ROOT CANAL**

Root canal therapy, root canal possibilities, still divide the profession into two camps. Skillful and learned men are bending their energies to find a solution for this goading problem.

Others would obliterate the problem with the swift decree of the forceps. They instance the surgeon's impatience with a bothersome appendix. The protagonists quote instances where the appendix seems to have recovered and its owner went on to old age. "But why take the chance?" is asked.

"Life is taking a chance," is the reply, and so vagueness like a veil enwraps the whole. Sur-



*Dr. Stanley D. Tylman, Chairman, Partial Denture Section.*

geons insist that anyone who has ever taken out a pulpless tooth knows that in the death of its pulp the tooth has changed, noticeably. It is brittle. You might as well confess it, the dentin at least is dead. And when a patient wastes lingeringly from some obscure cause the internist says, "Every pulpless tooth is a potential focus," and the dentist nods assent. "Then it must come out!" The evidence seems to be that the patient confronted with a pulp eradication is more dominant in the argument than the voice of Science.

In health he is not afraid of it. It is a good tooth he says. We can take it out when it begins to trouble. For him the search is being made. He pays the bills, makes dentistry a means of living. He must be heard. When he is ill and a tooth might save

his life he will consent. Verily, life is a gamble.

#### THE DISPLAYS

Displays from a number of schools and the work of particular pathologists were assembled in three rooms. Films showing the multifold phenomena of tissue response following resections, treatments and fillings constituted a large part of it. Curiosities showing the sport of cells in construction and destruction in response to similar stimuli. Models of pathological lesions in a terrifying array and photos of faces remade by the plastic surgeon's art. Sections of normal and abnormal tissue arrangements stained and photographed lined the walls. Much of it and perhaps the best of it from a famous Vienna laboratory—all of it pertaining to the mouth and the jaws in particular.

#### GOTTLIEB

With the coming of Gottlieb to America a renascence in microscopic study seems to have occurred. And no wonder. The sections he brought were probably the most beautiful ever displayed to the eyes of dentists in America. The technique involved was scrupulous, meticulous, perfect.

Later one school in philanthropic mood advised other schools to purchase duplicates of his wonderful display models. That was a debatable procedure. Its effect might have been a depressant to technical progress. The materials might have pro-

vided study for years to come. Certainly the funds from the purchases would have aided Gottlieb's studies. I do not know what schools bought. But what of his interpretations! He is quoted betimes by those who can find translations of his work or employ an interpreter. A few are accepting his terminology and using it. That is a small matter. The big matter is in the journalism it has swelled and the revival of interest in the subject.

#### WAS SOLOMON RIGHT?

This is apropos because the revival is strongest in Chicago and the display was so extensive at its meeting. Men, specialists heretofore in fields not thought to have much contact with tissue structures, have enlisted in microscopic research. Young men and men no longer young, porcelain and removable bridge specialists and plate-makers find reason to acquire the great Austrian's science. They threaten to speak with a German accent. But a perusal of the labored products, an attentive ear to the urgent presentations, make one wonder if Solomon was not right after all.

#### PRIORITY?

One wonders what Rose, Salter, Mummery, Williams, Black would think of the advance made as absorptions, fillings, regenerated periodental fibres, bone removal and reconstructions are displayed with an air of priority.

A contrast of two meetings illustrates a jest of Time. Some years ago at a meeting held in an Indiana city, a research worker possessed of limited prestige in his field presented a story of pulp resection done with serious intent and the hope that the severed would rehouse itself safely under a hood of adventitious dentin. He had seen scraps of pulps left inadvertently by faulty root canal workers and assumed the preceding possibility. Histologists at that meeting laughed him out of court.

Latterly sections in thousands have been made to show what he saw at the apex of teeth and the hope is now expressed that the scrap left, if the tissue has not been too much "insulted," will close the apical foramen. When the theorist, the pure scientist, discovers that the latter thing may happen the pragmatist will have the task of discovering how to predetermine it.

#### FOIL FILLINGS

To pass from the sublimities of dentistry we found a small group gathered obsequiously around the feet of an ancient idol—the cohesive gold filling. There was an air of peculiar deference in the room, a something reminding one of the odor of sanctity. The gathering was about an altar that had fallen into disrepute, neglect. It seemed like defending an ancient moral, time-worn, outgrown. The worshippers limited their subject as became the

times to anterior teeth. That was making a sizeable concession. One wondered as he listened if the proponents of this relic of past decades still hammer cohesive gold. What manner of fibre they possessed to resist the current appeal of the ubiquitous inlay and the insidious, if not invidious silicate filling. In the first days of the century the order of value of the different filling materials was, first and always best, gold foil; second, and unhesitatingly so, amalgam.

The inlay had only discussional claims and silicate none at all. It had not come. In practise today the gold inlay has an overwhelming priority, silicate supplants gold almost entirely in all teeth where cohesive gold can most readily be used and amalgam is a unanimous choice where esthetics or the patient's purse do not forbid.

In spite of this however, only enthusiasts can claim that the best inlay can compare with the best cohesive gold filling in its own right. Disdaining the patient's comfort, the weakened tooth, and the tedium of hammering cohesive gold and speaking only on the merits of the fillings themselves, dentists know that the modern idol has clay feet.

If adaptation to cavity surfaces, if leakages, if possibility of cement washing and subsequent invasion, if the aging of cement and the easy removal of the gold mean anything there is

no comparison left between the two. The cement line at the hands of good operators is invisible, the burnished margin is an adequate seal, the life of the cement is adequate and history justifies the inlay. History does justify it as it does cohesive gold. Other claims for it are defensible.

But one wonders as the defendant of the inlay becomes eloquent if he really believes in the perfection of his own margins, of the stability of cement, and if he should concede that either is at fault if he knows the size of bacteria and the infiltration possibilities of fluid.

Fortunately, perhaps, inlays and cohesive gold fillings alike succeed not so much because of the perfected margins and condensations as they do on the immunity of the mouth. Immunity cuts the Gordian knot of final values, practicability the rest.

#### AND DIET

"The How of Feeding Children," in spite of its barber-shop idiom, interests all fathers and mothers of big families. They wish they knew an easy method. Feeding was by no means overlooked. Carrots and lettuce, cabbage and milk were displayed in abundance.

One wondered if the human race in losing its third molar might be recompensed by the development of incisors of persistent growth to cope with the diet. And cod-liver oil in lakes and seas. Scylla and Charybdis loom for the skeptical: The in-

crease of manufacturing interest when a scientist airs his dreams, an altruistic interest, no doubt, and the rise in the price of liver as soon as butchers heard that what we had fed to the cat or only the poor could buy, was a food petted of science.

I recall an Indiana scholar (*italics*) reciting the habits of lions and tigers, driven by an instinct for vitamins, pawing carcasses for the vital organs and thus giving liver its impulse to high cost. Likewise, he would obliterate dandruff, moles, caries and what have you with a deluge of cod-liver oil.

He has spoken over wide acres of our science-loving, advertisement-believing states and always his message is the same, enthusiastic, comprehensive, misleading. Who is fundamentalist enough not to believe in the worth of scientific food studies? If Herodotus, the story-telling historian, is truthful, the Egyptians, five hundred years before this era formulated food values. He said "The Egyptians laid all ills upon foods and when they were sick ate many vegetables with leaves."

#### IN A WORD

A listener to Dr. E. V. McCollum asked him to tell simply the gist of all this dietary confusion and he said, "Eat plenty of vegetables, drink plenty of milk, and occasionally take some meat." Scientists worth hearing are always sanely conservative.

It is to be expected that this

latest exuberance shall make history repeat itself. Housewives will regard themselves as up-to-date, as they balance meals just as in days not far past they figured their calories. The butcher has seen his chance and raised his prices. Schools have reeked with the stench and echoed with the whistlings of guinea pigs and thousands of little lives have shuddered into oblivion at the hands of bungling technicians. And this we are assured is science. A titled worker was asked what he and his confreres were doing with the pigs. "Research," was his reply. "What is your objective?" was asked again. "Oh, just research," was the naive and illuminating response.

#### FUTILE "RESEARCH"

Sometime, somehow, in the near future, let it be hoped, dentistry will have to learn that scholarship is a prerequisite to the thing it is now endlessly patterning about. Parroting words and slopping aniline dyes do not produce anything but waste and boredom.

The profession, through its schools, has treated this phase of its own life with strange nonchalance. Sometimes fear, sometimes jealousy, sometimes bigotry, and most often ignorance has led it to play fast and loose with every facet of scholarship.

#### SHORT-CUTS TO FAME

It has passed men from classroom to professorships by weird short-cuts, it has titled practitioners who have never taught

before or who have only skill in some trifling technic; it gives academic honors to clerks and maintains professorial incumbents upon their face value and nothing else. It has doubled degrees in an effort to raise its standard in imitation of medicine. Deans have passed favors of academic letterings among themselves to establish each other in plausibility. Some acquired baccalaureates for work that would have dropped students in quest of the same degrees from the rolls. A bootstrap method of self-elevation.

Where else, but in dentistry, could a lone man be counted great enough to head research in any branch his fancy dictates, train his own workers and boast that he trained himself to the efficiency required by the most exacting branches of modern science and be accepted as an authority? Men can be trained. The type of training required for the work desired is observable in the colleges next door.

Certainly self-made investigators are illustrious in history but the formula made general is ruinous. The world honors such men, but it does not honor the principle as a general academic procedure.

\* \* \*

Many a friend of the magazine visited the ORAL HYGIENE CORNER in the exhibit hall and staff-members are grateful for the helpful suggestions and thoughtful words of encouragement voiced.

## The

# Johnson Bust

ONE of the events of the Chicago Dental Society meeting was the presentation, by a delegation from the Oklahoma State Dental Society, of a bronze bust of Dr. C. N. Johnson.

The bust is the work of Dr. J. B. Jenkins of Oklahoma City, and the presentation was made at an informal luncheon at the Stevens Hotel, attended by Dr. Johnson, Dr. Jenkins, Dr. E. E. Sanger, Dr. Ringo and Mr. Ernest Dalton.

ORAL HYGIENE interviewed Dr. Jenkins who revealed the interesting history of the bust.

In April 1928, Dr. Johnson attended the Oklahoma State Dental Society's annual meeting as the principal speaker. "When Dr. Johnson left the platform during the Tuesday session," said Dr. Jenkins, "the thought suddenly came to me, 'what an excellent character study could be made of that face!' I decided at once to ask him to sit for me.

"As he passed down the aisle, I intercepted him and walked with him. I asked if he would let me take a series of photographs of him for the purpose of a sculptural study and he readily assented.

"Later, during the sitting, he remarked 'don't go to so much trouble—the old carcass is not

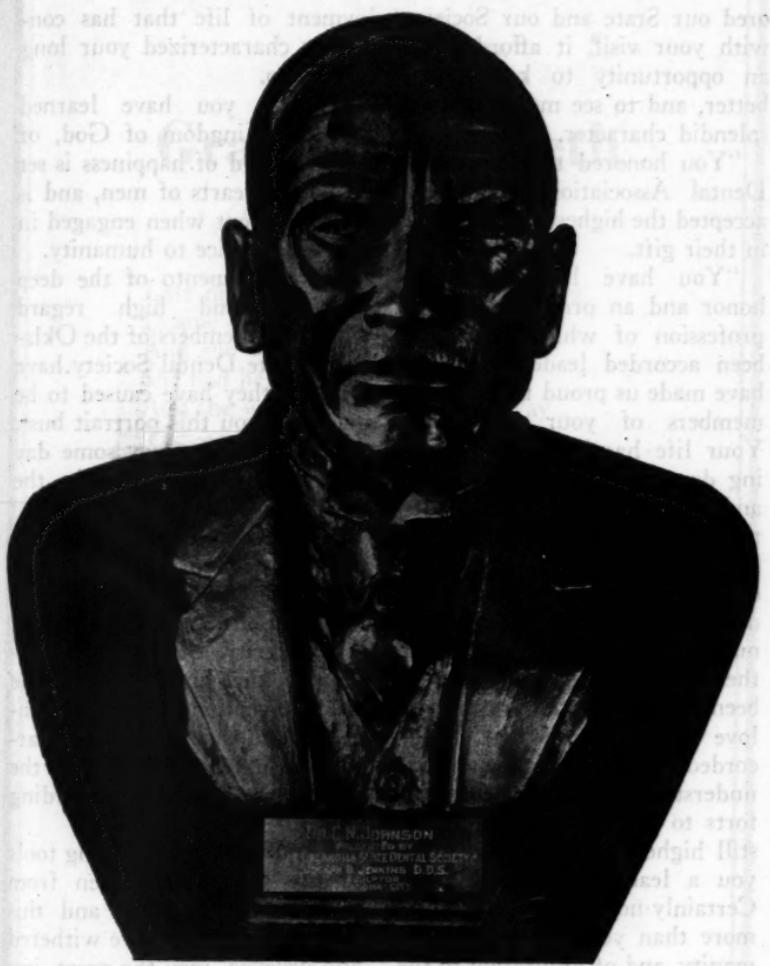
worth it'—which prompted me to reply that 'truly the body is of little consequence since it is so temporary. But the record in the face—and the soul that looks forth from the eyes—are what we wish to keep.'"

Right after the pictures were taken Dr. Johnson was called back to Chicago, and only the photographs were left to work with.

"I set about to get clay for the work," said Dr. Jenkins, "there was none to be had in Tulsa. A good friend of mine, Dr. Carnes of Henrietta, Oklahoma, volunteered to take me in his car and find a clay bank. Failing in this, we discovered a brick-yard where we procured enough brick clay to make a half-bushel of plastic clay."

Dr. Jenkins started to work at one o'clock—kept at it for sixteen long hours, finishing the master model, from which the bronze was later cast, in time to unveil it in the general assembly of the Society the next day.

A wave of surprise and delight held the group speechless for a moment. Then within a few minutes Dr. John Glass of Tulsa, introduced a resolution that the master model be reproduced in cast bronze and presented to Dr. Johnson as a gift from the Oklahoma Society;



*Bronze bust presented to Dr. C. N. Johnson by the  
Oklahoma State Dental Society.*

the resolution was unanimously carried.

Late in December the master model was cast in bronze in time to make the presentation at the Mid-Winter meeting of the Chicago Society.

Dr. Jenkins, at the request

of his fellow Oklahomans, himself made the presentation:

"Dr. Johnson—I am expressing the sentiments of the membership of the Oklahoma State Dental Society, in what I am about to say.

"Last year, when you hon-

ored our State and our Society with your visit, it afforded us an opportunity to know you better, and to see more of your splendid character.

"You honored the American Dental Association when you accepted the highest offices within in their gift.

"You have long been an honor and an ornament to the profession of which you have been accorded leadership. You have made us proud to be called members of your profession. Your life has been and is being devoted to healing the sick and bearing the torch that lights the souls and minds of men.

"You have achieved heights of esteem and appreciation seldom attained by one of our number. I doubt if any one of the dental profession has ever been accorded the reverence, love and affection that is accorded to you. Your gentleness, understanding and tireless efforts to advance dentistry to a still higher plane, have marked you a leader without a peer. Certainly no one has contributed more than you of good to humanity, and of inspiration to the sum total of the fine spirit that today characterizes the profession of dentistry.

"The gravity of your positions and the burdens of your multiplied responsibilities have never quenched the fire of your youthful spirit, cooled the optimism or lessened the keen en-

joyment of life that has constantly characterized your long leadership.

"Truly, you have learned that the Kingdom of God, of goodness and of happiness is set up in the hearts of men, and is most apparent when engaged in unselfish service to humanity.

"As a memento of the deep affection, and high regard which the members of the Oklahoma State Dental Society have for you, they have caused to be made for you this portrait bust, which, we hope, may some day find its rightful place in the halls of the truly great.

"The sculptor has tried to record in immortal bronze, for generations yet unborn, the long life of useful, unselfish service, the integrity, the fire, the gentleness, the high resolve, the keen perception, the mighty intellect and the strength of character so indelibly written in the face by the constantly recording hand of Time.

"And when the working tools of life shall have fallen from your nerveless grasp, and this mortal body shall have withered and decayed, may the great, immortal soul that now looks forth from the eyes of Dr. Johnson still go marching on."

Dr. Jenkins, who only recently discovered his ability as a sculptor, has also completed several other subjects, which will be pictured in an early issue of ORAL HYGIENE.



## Grandma's Teeth

By Edgar A. Guest

Last night when I went up the stairs  
I came on grandma, unawares,  
And she was in the bathroom, and  
She had her teeth out in her hand  
And she was scrubbing just the way  
The servant scrubbed the floor today.

I couldn't hardly b'lieve my eyes!  
It surely was a good surprise,  
Coz I supposed that teeth grew in  
An' had to stick right to your chin,  
But grandma had hers out, and she  
Could scrub them right where I could see.

Then with her finger and her thumb  
She put them back into her gum,  
And when she saw me standing there  
She said: "My goodness, what a scare  
You gave to me! I never knew  
A boy to be as still as you."

Ma makes me brush my teeth at night  
And mornings, too, to keep them white,  
And I must keep my toothbrush flat  
And can't see what I'm scrubbing at,  
But I could scrub them shiny, too,  
If mine came out like grandma's do.

Copyright by Edgar A. Guest.

*This is the second contribution by Eddie Guest who is writing verse on dental topics for ORAL HYGIENE this year. Uncle Walt Mason is contributing to alternate issues.*

# Expedition Studies African Bushmen's Teeth

*By Karl Baals*

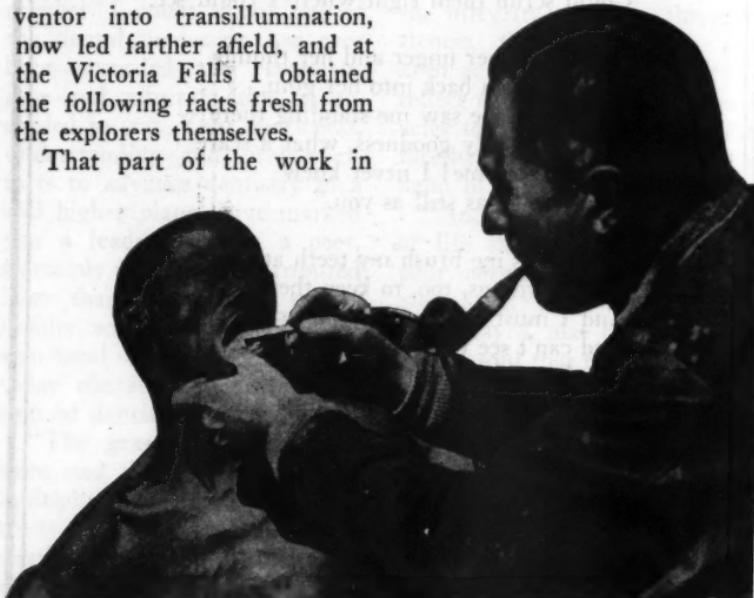
IT was the good fortune of the writer, when recently out on "The Last Frontier," to meet my old friend, Will J. Cameron of transillumination fame, as he emerged from one of the legs of the Cameron-Cadle Kalahari Desert Expedition.

At this moment he is still listening to the booming of the lion's voice on the magic edge of his camp-fire. To make a long story short, the spirit of adventure which took this tireless inventor into transillumination, now led farther afield, and at the Victoria Falls I obtained the following facts fresh from the explorers themselves.

That part of the work in

which Will Cameron is interested is naturally related to dentistry, to investigate the fascinating subject of primitive teeth. The Kalahari Desert was the field chosen for operation because it is believed that the Bushmen living here are the most primitive people on the face of the planet.

The Kalahari Desert is the stamping ground of C. Ernest Cadle, anthropologist, a rugged son of the Dark Continent, with



*Dr. Cameron examining a savage's mouth with what the natives called a "witch-devil."*

## Editorial Note

**I**N the August 1928 ORAL HYGIENE editorial reference was made to Dr. Will J. Cameron's expedition into the heart of Africa.

Dr. Cameron went over there to look into the anthropology of the district with a view to fixing the location of the cradle of mankind, and very particularly to investigate the subject of primitive teeth.

Just recently another friend of ORAL HYGIENE's, Karl Baals, overseas emissary of the Antidolor Manufacturing Company, encountered Dr. Cameron at Kowena, at the edge of the Kalahari Desert, and has written this article about the expedition for ORAL HYGIENE.

The same African mail brings a letter from Dr. Cameron himself in which he says:

"We have had a most interesting year with the Bushmen. They are all that history says of them—and then some. They wear a small piece of buckskin when fully dressed and every one of them smells to high heaven.

"I met a very interesting personage yesterday in Mrs. Foljambe of London. She is a Diana with five lions to her credit. She is going into the Lake Kivu region tomorrow to get better acquainted with the gorillas. She has led several expeditions into Africa and is going alone except for her white guide and one hundred black 'boys,' as they are called here.

"She has an international reputation as an adventurer and she would grace any ballroom. Verily the women do move these days and times!

"We are through here and on Monday will start North—where to, doesn't matter. Mannen, our geologist, and Hoder, our photographer, will be with me. We will ramble back to the U.S.A. when the smells lack variety or cease to charm."

Dr. Cameron returned to America during January and attended the Chicago Dental Society meeting.

the marks of Africa plainly in evidence. Cameron became associated with this man because of the opportunity afforded for research on such a trip into the mystery-land of South Africa.

The expedition made a study of the different tribes with which they came into contact, but the principal work was done with the Bushmen, the ancient aborigines of South Africa prop-



*The white personnel of the expedition.*

er. At one time these diminutive little people inhabited every cave and grotto in South Africa, but they were killed on sight and hunted like beasts of the field.

The only survivors now are found far away in the Desert, from which the explorers have just returned. Many still photographs and motion-picture studies were made of the life, the habits and customs of these people, making a complete record of their culture just before the besom of fate is about to sweep the last of them from the face of the earth.

The Bushmen, according to the explorers, live today as our ancestors lived more than twenty thousand years ago, and it is this fact to which they call attention; for here we have a picture of the real life of our forebears in that dawn period of social culture and human origins.

Attention is called by Dr.

Cameron to the food conditions of the Bushmen as determining factors in the development and preservation of teeth. It is the old story of environment at play again: "The Bushmen live entirely on meat, roots and berries, and because of the simplicity of the diet, the effect on the growth and development of the teeth is therefore of great interest.

"The most remarkable phenomenon we observed was that the Bushmen seldom lose their teeth, in fact, some observers say never. The teeth are always worn flat, close to the gums, but are always there, and sound. The question of occlusion is not a serious one with the Bushmen, and the teeth fit like mill-stones,



*Two American dentists, Drs. Freeze and Clayton Cann, whom Dr. Cameron met at Bulawayo, Rhodesia.*



*Dr. Cameron astride a prize.*



*Tooth filing is common among the members of many tribes.*

and seemingly function as perfectly.

"Age plays a very unimportant part in the retention of the teeth.

"The Bush-folk keep their teeth until death. This seems to be a merciful provision of Nature, for the Bushman is helpless without his teeth; there are no dentists to give him a new set, nor soft foods to keep the old Nimrod going. When the Bushman has lost his teeth he has come to the end of the trail from which hunters never return."

That the teeth are never cleaned is another observation; they are generally covered with a thin coating of ashes. Meat and also roots usually are eaten with the ashes clinging to them. It takes the place of salt as well as acting as a "relish." This same effect of the ashes can be seen on the teeth of European specimens of fifteen and twenty thousand years ago, giving us a marked relationship between the pure hunters of that remote period and the last of their type existing in the Kalahari today.



Dr. Victor Hugo Jackson, noted orthodontist, died on Saturday, January 26th, of pneumonia. Dr. Jackson was in his seventy-ninth year.

He was the author of texts on orthodontia and orthopaedia of the face and developed the system of regulation which bears his name.

# KOHINOORS

By John Philip Erwin, D. D. S.  
Perkasie, Penna.

(Kohinoor: a famous East Indian diamond presented to Queen Victoria; said to be the largest and clearest gem known to man.)

◆ ◆

A timely toast: Here is to our new president, Herbert Hoover; inspired with the spirit of Saint Patrick, may he drive out of our beloved land those deadly vipers that threaten life, liberty, and the pursuit of happiness.

[I was under the impression in the recent campaign that Saint Patrick was a Democrat. Possibly an inspiration from him might encourage Mr. Hoover to try for the Hearst prize.—R.P.M.]

◆ ◆

Not the least deadly of these vipers are oral bacteria.

◆ ◆

Six signs of oral infection: wilted physique; fetid breath; tripe-coated tongue; inflamed mucosa; abnormal temperature.

◆ ◆

Six symptoms: tenderness about teeth; *that tired feeling*; labored breathing; intestinal discomfort; mental skidding; neurotic pains.

◆ ◆

Exciting causes: tobacco smoke; modern moonshine; toxins from intestinal ash; filthy, bestial habits.

[The doctor seems to forget that the moonshine makes 'em blind so that they can take the Old Gold smoke test. If they have "filthy, bestial habits" mental and physical hygiene should precede dental hygiene. In the list of horrors he failed to mention garlic and onions.—R.P.M.]

◆ ◆

Susceptibility: first are the bulky, pallid, undependable lymphatic; second, the high-strung, low-grade nervous; third, the sallow, stolid, blue bilious; lastly, the fair, florid sanguine.

◆ ◆

Oral infections present as complex a variety as there are kinds of snakes. Govern your treatment according to the sting.

[The treatment for snake bite seems to be much the same for every kind of snake.—R.P.M.]

◆ ◆

Always consider, age, sex, occupation, and character of patient.

[Don't spend too much time on the consideration of the sex.—R.P.M.]



W. LINFORD SMITH  
*Founder*

# ORAL HYGIENE

REA PROCTOR McGEE, D.D.S., M.D.,  
*Editor*

Manuscripts and letters to the Editor should be addressed to him at 514 Hollywood Security Bldg., Los Angeles, California. All business correspondence and routine editorial correspondence should be addressed to the Publication Office of *ORAL HYGIENE*, Pittsburgh, Pennsylvania.

## Press Censorship

**T**HREE can be no general and lasting freedom that does not rest upon the solid foundation of the right to express opinions without governmental interference.

Our liberties are rapidly falling before the onslaught of our reformers. These reformers may be right and again they may be wrong; at least they represent the suggestion that they are not perfect.

There are three great classes of people in this country—one very large quiet class and two small active classes whose interests are sometimes strangely combined.

We have developed a very small group of bad people—some very bad and we have developed another small group of good people—some very good—some not so good. And then, without much development, is that great mass of the rest of us—not so good—not so bad—rather quiet and long suffering.

The rest of us have looked with mild concern upon the funny efforts of the police to stop the crime wave by arresting automobile drivers and we have seen the passing of the circus tent evangelists and have felt that the pulpit would do better in morals than in politics. And now the restless good ones are organizing far and wide to reform everything.

The movie shows are already censored to death without improving their morals. One of the latest "ukases" in Hollywood is that if an umbilicus should

# Editorial Comment

be exposed in a picture, even by accident, it is all off—that picture cannot be shown. It has always seemed to me that with the possible exception of Adam and Eve everybody had an umbilicus. If they were so wicked why did God make so many of 'em?

Our books are censored. Our shows are censored. Our morals are censored. In California a man and his wife were driving on a main highway in two separate cars, going to the same place. As the husband's car passed from behind the car which his wife was driving, he threw his wife a kiss. One of our highly moral traffic cops promptly arrested the husband for flirting; explanations did no good; he went to jail. Yet on that same road truck after truck of moonshine whiskey thundered along, breaking speed limits. Do you suppose truck-loads of liquor race about on highways without the knowledge and consent of the liquor enforcement censors? Did you ever know of a bootlegger being caught after smashing a legitimate private car?

The latest move is an organization, national in scope, whose one object is censorship of the press.

In America such an organization would have been preposterous a few years ago; today it is a distinct menace.

The insane desire of the few to interfere with the many is rapidly passing from the raving stage to the stage of reality. Censorship of the press is today threatened. When we get censorship of the press there will, of course, be one big censor and a lot of little censors. The organization that puts the idea over will direct the big censor and he will direct the little censors—at the start.

Then politics will creep in. Then influence—measured in terms of cash and patronage. You will read exactly what the public censors and their bosses

desire you to read. New crimes will be invented, more trials, more judges, more juries, more jails, more families broken up, more suffering among the children of these new convicts. Isn't it a beautiful idea? Fetters placed upon the mind, in the land of the free. Punishment for agreeing with the Revolutionary Fathers.

Information that must be filtered through the thick minds of political "lame ducks" will be our mental pabulum—unless we are forced to adopt the methods of those countries where Freedom of the Press is denied.

I have never been a convert to the principles and practice of bootlegging but if press censorship should come, I am inclined to think that many otherwise law-abiding citizens will get themselves jobs as censors in order to learn how to beat the game.

In these uncensored days many of the thoughts expressed do not amount to much, but they seem to me better than the ideas of the *verboten* clan.

A thought that is expressed under the jealous eye of the censor might be a free and noble thought but the chances are that it wouldn't. The Censors forced Galileo to *say* that he believed the earth was flat.

### Convention Expenses

Cecile M. Jack v. Commissioner of Internal Revenue. Docket Nos. 14995 and 17662, Board of Tax Appeals.

The taxpayer contended here that he was entitled to a deduction for expenditures he had made in connection with attending conventions of medical associations. These expenditures were for railroad fare, hotel accommodations and meals. The Board of Tax Appeals sustained his contention reversing the commissioner of Internal Revenue.

**D**R. JACK of Decatur, Illinois, has done a real service in getting the Board of Tax Appeals to over-rule the fiat of the Commissioner of Internal Revenue.

Our ancestors as well as the descendants of our ancestors have fought many a bloody battle to escape from fiat government. We have opposed monarchy in all forms because we believed in laws made by our legally elected representatives, yet we have the anomaly of an appointed Commissioner of Internal Revenue who makes rulings that, so far as the taxpayer is concerned, are law. Such power could only be delegated because Congress is too lazy to make the proper regulations.

If somebody with a reasonable amount of brains could be employed to rewrite the whole income tax law so that somebody—anybody, in fact—could understand it, his name would go rolling down the halls of fame with Lycurgus and Andy Volstead and Will Rogers.

There is no doubt that ninety-nine and nine-tenths per cent of the citizens make a very serious and conscientious effort to comply with the income tax regulations. The law says that legitimate business expense shall be deducted. We believe that the expense of attending professional conventions is a legitimate business expense. The commissioner thought differently but fortunately Dr. Jack's case was decided in his favor and so your expenditure necessary in the attendance of your State and National meetings may now be deducted from your gross income.

Let us hope that this is only one of the many changes that should be made in the allowances to professional men.

### Titles

A NUMBER of letters have arrived commenting upon the remarks published in one of the medical cure-all columns, in which a suggestion was made that dentists drop the title of *Doctor*.

I really do not see why anyone should be called Doctor unless he is a teacher. The word *Doctor* is so abused these days by all of the cults and half-baked systems of treatment that it doesn't mean anything. It resembles the plight of the ancient and honorable appellation of *Professor* which was formerly applied to the higher grade of teachers. So many dog trainers, tight-rope walkers and proprietors of various and sundry nostrums and tricks appropriated the title that it fell into disuse, and the very men who would, in the old days, have considered it an honor to be called *Professor*, now shun the title.

I fear that the title of *Doctor* is going the same way. It is quite likely that some day we will all be anxious to be called *Mr.* Our practices would be just as good and it wouldn't always be necessary to mention our occupation when we were introduced—calling a man Doctor to an unsuspecting prospect is like tying a bell to the cat.

### The Ironclad Course

THE ancient and Victorian periods of college education allowed practically no elective subjects. Possibly because there were not enough extra avenues of study to make any difference, so the wise ones fixed the channels in which the students should wobble along toward erudition.

When dentistry was launched as an educated profession there was not much to teach. In order to make up a course somebody had to dig up a respectable number of subjects. Somebody did and our students have been studying most of them ever since. As new subjects forced themselves upon the attention of our educators, they were included and eventually the course was lengthened to accommodate the situation. Now we have taken all the time we can get from the lives of students. We make all of them take the same courses. We try to turn out a uniform product. I say

we, because the dental profession by its lack of interest and its inertia allows the educational council to legislate for them and for the colleges.

Many years ago when David Starr Jordan became the President of Indiana State University, he liberalized the curriculum so that there were very few required subjects and many elective subjects for study.

The older college presidents threw spasms of righteous indignation—but the idea spread and when Leland Stanford wished to found his university, he chose David Starr Jordan to preside over it.

It seems to me that the time has arrived to liberalize the dental course so that certain subjects may be elective. No two minds are equal: the non-elective course may suit some minds or it may not suit any minds; it is quite certain that it will not suit all minds.

By giving some elasticity to the curriculum, more efficient and more diversified graduates would result. Of course, there are the state boards to consider but they, like the portcullis of the old castles, eventually fall into disuse.

Education is an interesting experiment that has not yet produced results sufficiently convincing to prove whether we have started in the right direction. Some of the world's greatest men could not have passed the literacy test at Castle Garden.

### Membership

**T**HREE is a big difference between being a joiner and being a member. A joiner joins anything that comes along. The regular joiner doesn't do any work after he has joined—he is interested in the big show while the band plays and while he thinks he will receive benefits without exertion.

The member is the man who belongs to a society that appeals to him as a combined effort of those who hold similar views.

Members assume responsibility, they do their part now without very much consideration of the definite result for themselves. Their faith in their organization is such that they realize they must benefit if their organization is successful. Real members of any organization can only be successful if all who have qualified as members do their duty whatever it may be.

The young man or middle-aged man or old man for that matter, who has not joined his local, state and national dental society should think the matter over.

First—Is dentistry a benefit or a detriment to human welfare?

If dentistry is a detriment to human welfare let us get up an organization to destroy it. If dentistry is a benefit to human welfare it is the duty of every dentist to contribute his effort toward the upbuilding of his profession and its organization.

Second—Do you believe in a code of ethics that will help to insure fair treatment of the patient and a proper attitude of one dentist toward another?

If you do not believe in such a code of ethics by all means go your own way. If you do believe in such a code, by all means join your society. Certainly we all desire a proper attitude toward our patients and we should try to be civilized to each other.

Third—Do you think dental societies run themselves? Well they do not—every man should take an interest in his society. It is true that a lot of the desirable jobs have been appropriated by more or less undesirable men—but why? Just because the ones who are too proud to fight let things slip. Wouldn't a natural born politician be a dumbbell if he saw a desirable job lying around unprotected and failed to grab it?

Don't get sore at your society because you don't approve of the officers. Go in and take a hand. Set up

a few combinations and lick 'em at their own game. Most politicians are not so smart as they are lucky to find that the thinking men do not exert the influence to which they are entitled.

The big idea is to join your society. Pay your dues, and above all be a real member. When you do your duty as a member, somebody will listen to your opinion but you can't influence your profession if you stand around the outside looking in.

### Why Not Add One?

THE following resolution presented before the Pathodontia Section, of the First District Dental Society, December 17th, 1928, was unanimously adopted:

WHEREAS the officers and members of the Pathodontia Section, of the First District Dental Society, recognize the importance of the use of the x-ray as an aid in diagnosis, and during the process of treatment of pulpless teeth, and

WHEREAS certain practitioners ignore this procedure, and

WHEREAS such practice is considered contrary to the best interests of the patient,

BE IT THEREFORE RESOLVED that such procedure will be considered questionable practice in this branch of dentistry, and

BE IT FURTHER RESOLVED that this resolution be entered upon the minutes of this Section, and a copy be forwarded to the professional journals for publication, and also inserted in an early issue of the First District Dental Society *Bulletin*.

Why not add another "Be It Therefore Resolved" that anyone caught treating root canals either with or without the x-ray be thrown out unless he could show a carbon copy of the notice given the patient that in the present state of dentistry, the treatment of root canals is a risky business and is to be done only in carefully selected cases after proper warning to the patient?

# The Associated Dental Case

By Frank W. Brock

[*AUTHOR'S NOTE: On October 31, 1928, Lupton Sprinkle, Lake H. Sprinkle, Peter O. Sprinkle, and Bane Z. Sprinkle were indicted by a Federal Grand Jury. Previous to this (September 13th, 1928), the Attorney General of the State of New York obtained a permanent injunction restraining these defendants from selling stock in the Associated Dental Products, Inc., and Lockxon Tooth Manufacturers, Inc., within and from the State of New York. The amount alleged to be involved was said to have been in excess of \$1,000,000. Many stockholders were dentists.]*

FOR several years Lake Sprinkle has had a dental laboratory on the corner of Nevins and Schermerhorn Streets. Many Brooklyn dentists know him well. I used to pass the place daily at all hours because I lived just a few doors up the street. Modest little lab. it seemed to be, never very busy, with the name LAKE H. SPRINKLE on the windows in big gold letters. Although I did not know it then, this small brick building was destined to become the birthplace of what the Government has charged is "a scheme to defraud," and today

Lake and Lupton and Peter and Bane Sprinkle are held under \$2,500 bail for trial in Federal Court.

In the complaint prepared by the New York State Attorney General in an action under the Martin Stock Fraud Law of the State are cited twenty-four alleged misrepresentations made by the salesmen who sold the stock of the Associated Dental Products to the public. The books and records of this company divulged, according to the State, the fact that each of the four Sprinkles indicted received \$5 a share for each share of stock sold and that up to April 30th, 1928, they had received as "commissions" the sum of \$234,600. These same principals controlled Lockxon Tooth Manufacturers, Inc., and as officers of this company it is alleged that they received the sum of \$91,651.87 for their services.

But suppose we start at the beginning and follow the trail from the dental laboratory of Lake Sprinkle to the final chapter written by the Attorney General.

In the original prospectus of the Associated Dental Products, Inc., Mr. Lupton Sprinkle, as president, says:

"Associated Dental Products,

## An Investment Series

Mr. Brock, who wrote this article for **ORAL HYGIENE**, is preparing a series on investment topics. He is thoroughly conversant with his subject and the articles will be interesting and authoritative.

Because the profession is out of touch with commercial affairs, it is easier to sell us questionable investments, so dentists are the special prey of folks eager to let us in on "opportunities."

Mr. Brock will endeavor to set up warning signals.

Inc., organized under the laws of Delaware (May 1925), is the gradual development of the business started over twenty-eight years ago by Lake H. Sprinkle, Inc., a concern which was one of the pioneers in the commercially operated dental laboratory business, and which developed into dental manufacturing and later fostered and brought into the dental world Lockxon Tooth Manufacturers, Inc., a corporation manufacturing a full line of artificial teeth from a new and superior *life-like* porcelain.

"Associated Dental Products, Inc., will act as sole distributors for Lockxon Tooth Manufacturers, Inc., covering the complete line of artificial teeth, etc., and will manufacture and distribute the entire line of dental supplies and appliances through a system of Controlled Chain Dental Supply Depots in all principal cities."

The prospectus offered 16,-

000 shares of Class "A" common stock of no par value (without voting rights) at \$100 a share. (2,600 shares of Class "B" [voting] stock was listed but it is alleged that this was issued to Lockxon Tooth Manufacturers, Inc., and not sold to the public.)

The State's investigators alleged that the entire capitalization of the Lockxon Company, in turn, was 5,000 shares of no par value common stock of which 2,600 shares, carrying control, were held and owned by the four Sprinkles who, because of this controlling interest in Lockxon controlled both companies. It is also alleged that none of their stock had been paid for in cash! The remaining 2,400 shares of Lockxon stock were sold to the public for \$100 per share.

The Lockxon Company which began operations in 1922, according to the complaint of the people of the State of New

York, did no actual business other than conduct a campaign for the sale of its stock until the organization of the Associated in 1925, when it exchanged the sales rights for Lockxon teeth to the Associated Company for the 2,600 shares of Class "B" voting stock mentioned above.

Having thus established the corporate set-up of these two closely affiliated companies, let us see what the official line-up is according to the Attorney General of New York State.

Lupton Sprinkle is the president of the Associated and treasurer of the Lockxon.

Lake H. is the vice-president of the Associated and also vice-president of Lockxon.

Peter O. is the treasurer of the Associated and president of Lockxon.

Bane Z. is secretary of both companies.

"False pretenses, false representations, false statements and false promises," are the words used by the Attorney General to describe the practices of these men and their salesmen, and he goes into considerable detail as to the exact statements used and the practices resorted to. I quote from the complaint the statements made by the salesmen who offered the stock of the Associated Dental Products, Inc., to the public, together with the alleged facts as developed by the investigators for the Attorney General, which facts also appear in the sworn complaint:

"(a) That the Associated

*Company did not employ salesmen to sell stock.*"

"The Associated Company employed from 16 to 75 stock salesmen at different times under a sales manager and the total proceeds from the sale of stock up to April 30th, 1928, was \$1,022,538.50. The total cost of the sales organization up to April 30th, 1928, was \$450,004.53, so that the company received a net of only \$572,533.97."

"(b) That the Associated did not use any advertising literature or prospectus for the purpose of selling its stock."

"The Associated Company printed and distributed many thousands of copies of a prospectus which was used as advertising literature."

"(c) That none of the defendant Sprinkles had received any compensation for the sale of stock or otherwise."

"The Sprinkles, and each of them, received \$5 per share for every share of the Associated Company that was sold, so as commissions they received the sum of \$234,600 up to April 30th, 1928. In addition, as salaries from the Lockxon Company, they received the sum of \$91,651.87 up to December 31st, 1927."

"(d) That the defendant Associated Company had a large foreign market for which it had orders, (e) likewise a large domestic market."

"The Associated Company had no real market for its product either foreign or domestic

and is not and has not been engaged in the sale of dental products, except to the extent of \$76,482.45 in three years, and of having a limited sample supply on hand to display to prospective purchasers of its stock and its principal business has been the exploitation and sale of its capital stock."

"(f) *That the Lockxon Company had declared a 100 per cent stock dividend.*"

"The Lockxon Company did not have any profits out of which it could declare a 100 per cent stock dividend or any stock or cash dividend whatsoever."

"(g) *That the Sprinkles had invested \$200,000 cash in the Lockxon Company.*"

"The Sprinkles made no cash investment in either the Lockxon or the Associated Companies, but instead procured for themselves 2,600 shares in the Lockxon Company and 2,600 shares in the Associated Company issued in the name of the Lockxon Company without cash consideration."

"(h) *That the teeth manufactured by the Lockxon Company had been passed upon and recommended by the Dental College of the University of Pennsylvania.*"

"The teeth manufactured by the Lockxon Company have not been recommended by the University of Pennsylvania."

"(i) *That the Associated Company was in a very prosperous condition.*"

"The Associated Company is not in a prosperous condition,

but on the contrary, has never declared or paid a dividend, has never earned any profits and is now in a state of insolvency, so that their loss on December 31st, 1927, was \$789,977.03. That the operators of the Associated and Lockxon Companies have been unsuccessful and the Associated Company is maintained from the proceeds of the sale of the capital stock to the public and not through the manufacture or sale of dental products."

"(j) *That the stock was offered for sale because the company needed more capital for its growing business.*"

"The capital received from the sale of the stock was not needed for the growing business of the Associated Company as indeed it has had and now has no business other than the sale of its stock, but its capital was used in part of the following purposes, the figures given as of April 30th, 1928:

"Payment to Sprinkles	\$234,600.00
Cost of sale of stock	215,404.53
Total cost of sale of stock	\$450,004.53"

"(k) *That the Associated was going to establish seventy depots for the sale of its merchandise at the rate of ten depots a year.*"

"That the company has not only not established depots at the rate of ten a year, or of the maximum amount of seventy, but on the contrary there has been no opening of chain dental depots, nor any attempt to

do so, nor has it created any demand or market for its products. The only depot opened by the Associated Company is the one in New York City maintained for the sale of its capital stock. Instead of opening a dental depot in Philadelphia, Pennsylvania, the defendants organized a new concern there under the name of the Philadelphia Southern Dental Products and made a shipment to it of dental merchandise amounting to \$60,000 on credit and unsecured."

"(n) That the Lockxon Company had been in business under the same name for nearly 30 years."

"The Lockxon Company has not been in business for 30 years but was incorporated in 1922, and is not yet conducting the business for which it was incorporated. The Associated Company was not the result of the development of the business which was started 28 years ago by Lake H. Sprinkle, Inc. The latter company is still in existence and operating independently at the present time. The defendants were not engaged in the manufacture of artificial teeth prior to 1922. Their first undertaking in this field, which was, and still is, in the experimental stage and will be so for several more years to come, was in 1922 by the Lockxon Company."

"(r) That the Associated had a factory in Philadelphia where they were making instruments."

"The Associated Company has no factory in Philadelphia."

"(s) That the tooth paste manufactured by the Associated Company was carrying the expenses of the company on its profits alone."

"The tooth paste manufactured by the Associated Company did not pay even an insignificant part of the expense and as has been said its cumulative loss is \$789,977.03."

"(t) That the Lockxon Company was doing a gross business of \$1,500,000 and a profit of \$1,200,000 a year."

"On the contrary the Lockxon Company has been run at a deficit since 1922, the date of its organization, said Lockxon's deficit would be greater was it not for advances totaling approximately \$102,247.50 made to it by the Associated Company."

It is interesting to observe here that the Sprinkles drew no salaries, apparently, as officers of the Associated Company; it is alleged that their revenue from that source was derived from their commissions on the sale of the stock. They did, however, draw aggregate salaries of \$91,651.87 from the Lockxon Company and, it is alleged, the Associated Company "advanced" the sum of \$102,247.50 to Lockxon.

Despite this it is charged that in the face of continual and mounting deficits, which, it is alleged on December 31st, 1927, amounted to \$789,977.03, the Sprinkles raised the sales price of the stock from \$100 to \$110 a share and later to \$125. To

stimulate interest and make the public anxious to purchase, sales representatives informed prospective purchasers, it is alleged, that the books would be closed on a certain date and no more stock would be sold after that date. The books were never closed until they were closed by the Supreme Court of the State of New York.

At the time action was brought there was \$485,230.31 outstanding on stock sales which the defendants were making every effort to collect, the State's case disclosed.

There is a tragic note in the cold language of the law in one of the concluding paragraphs of the Attorney General's plea to the Court when he says:

"That by reason of the foregoing, plaintiffs have been, and are being, irreparably damaged by the defendants and the plaintiffs have no adequate remedy at law."

One Brooklyn dentist, I am informed, mourns the loss of \$20,000 invested in Associated Dental Products, Inc.

\* \* \*

Hundreds of stock promotions are being offered constantly to the American public. Every form of communication is used to the limit by promoters, the mails, telephone and telegraph. On one single stock offering one house (now defunct) used over 30,000 night letter telegrams to a "selected list" of clients. Many dentists were on that "sucker list."

Times and methods change. The methods of clever stock promoters change too rapidly for the uninitiated to keep abreast. They have extended their facilities and have paralleled as closely as possible the procedure of the more legitimate stock houses. Some of the larger dynamiters have mailed over half a million pieces of literature a week and their telephone bills are amazing. But all this is another story. It is a story that will never grow old because your money is a constant incentive to these operators to invent new methods or revise old ones to meet the needs of their "profession."

There is no cure once you are caught, but there is almost a sure preventive. Better Business Bureaus are maintained in more than forty cities and these Bureaus usually have information about local stock operators and can obtain information from any affiliated Bureau. The New York Better Business Bureau has 124 drawers of files containing information on over 40,000 different subjects—the majority of which are financial or investment. When you are next approached by a stock salesman, hold him at bay until you have consulted the nearest Better Business Bureau. There is never any charge for their services and if the information is not immediately available it will be obtained for you with the least possible delay. Investigate before you invest.

# For Chicago Children

HALF a million bad teeth made good between now and July 1st is the goal that he has set for his new bureau of dental hygiene, Health Commissioner Arnold H. Kegel declared in a talk before the Chicago Dental Society convention in the Stevens Hotel.

Approximately 250,000 children are included in the group to be examined in the five months' period from February 1st to July 1st. They are the pupils in the kindergarten to fourth grade inclusive, which covers the ages when dental attention is most urgently needed. Each child will be examined twice, according to present plans.

"The work will not begin until February 1st," said Dr. Kegel, "because supplies must be delivered, clinics equipped and arrangements completed for the educational part of the plan. No one will be placed on the pay-rolls until everything is in readiness and the program can go into full swing.

"We are going to employ ten dental hygienists, ten examining dentists and ten operating dentists. The program as a whole will be two-thirds educational and one-third operative. Eligibility of children for free services in the clinics will be passed upon by a committee in co-operation with the Chicago Council of Social Agencies.

"Since our appropriation will

not permit attention to all grades of the schools, the first four have been selected as offering the greatest opportunity for service. Eventually we hope to extend the work to the remaining grades.

"An examining dentist and a dental hygienist will work together in the schools. Each child will be given a card reporting the condition of his mouth which he will take home to his parents.

"The six-year molars are the most important from the viewpoint of preventive dentistry. Seventy per cent of these have defects. Thousands of unfortunate children lose these teeth, which are cornerstones for the entire denture."

The dental program in the schools was made possible by an appropriation of \$55,000 for six months, which was included in the corporate budget for the year. Dr. Kegel's request was endorsed by the Chicago Dental Society, the Illinois Congress of Parents and Teachers, Illinois Federation of Women's Clubs, Chicago Council of Social Agencies, United Charities, Chicago Association of Child Study and Parent Education, and the Chicago Woman's Club. These organizations will aid in petitioning the legislature for a law permitting the board of education to provide \$55,000 with which to carry on the work during the last half of the year. It is



Wide World Photo.

*Dr. C. E. Grizzell is examining Jeanette Kamboni, of the Belden School, at Chicago's new school clinic.*

planned to divide the expense equally between the health department and the board.

Out-of-town dentists who are prominent in dental public health work were guests of the

public service committee of the Chicago Dental Society at a special luncheon during the convention. They described the work being done in other cities and praised the project.



# "DEAR ORAL HYGIENE:"



*Readers of the magazine take their pens in hand*

## Would Publish Kells' Book

I would like to see Dr. Kells' book published and subscribe to same. Is the following suggestion of any value?

Advertise in your or some other national magazine for subscriptions to the book in the form of certified checks for say five dollars to be applied on the cost of the book, limit to be set at ten dollars. Then if enough seem interested there would be little chance of failure.—JOHN C. PAGE, D.D.S., *Sandpoint, Idaho.*

## Ambulatory Dental Clinics

Our Paris office has asked us for any information we can get from other sources regarding ambulatory dental clinics. We judge there is some idea of establishing such clinics in Finland. At the suggestion of the Cleveland Dental Manufacturing Company, we are writing to ask if you have any information in your files that might be of interest to us. Perhaps you have published articles regarding ambulatory clinics and could sell us the back issues of your magazines containing such articles.

Your co-operation in this matter will be very much appreciated.—R. C. DEAN, THE ROCKEFELLER FOUNDATION, *New York, N. Y.*

## Form Letters

In reply to "Form Letters" by N. J. F. in December 1928, p. 2327, ORAL HYGIENE, I wish to state:

Of all the accounts I have to collect, I think the most difficult are those of my friends. It seems the closer the friends, the harder to collect their accounts. They feel that Dr. So and So is a close friend and he won't mind waiting.

Writing a letter to this class of patients requires plenty of thought because they are so easily hurt.

Here is our form letter:

Dear Mr. Doe:

It is nearly always a disagreeable task to remind a friend about a bill. No matter how kindly it is done it is likely to hurt his pride.

Your account is now overdue. I know that you must have a very good reason for not paying this small debt. However, I would appreciate it, if you would let me know definitely when you expect to take care of it.

Only by receiving prompt payments, can I render the greatest possible service to my patients. You will help me greatly by settling your account at once.

—A. WARTELL, D.D.S., *Scranton, Penna.*

## Educating The Public

We are making every effort here, in this little city of about eleven thousand souls, to advance the knowledge of how to care for the teeth and why. We are, however, having considerable trouble due to a scattered condition of the population.

It has occurred to some of us that articles published in the daily and county papers might do more to reach all of the people than any other medium. We can get the space if we can get the articles. The papers sponsored by ORAL HYGIENE called *Your Teeth* seem to be what we want.

May we have whatever information you can give us concerning those articles?—F. F. HAPPY, D.D.S., Mayfield, Ky.

## It Means Diamonds

[A letter to Dr. John Philip Erwin.]

With no special axe to grind, I thought to write you complimenting you on *Kohinoors*, specially your suggesting that a small dictionary on your reception room table will win many silent thanks from waiting patients.

Before doing so, the suggestion came to me to look up the meaning of *Kohinoors*, having two small dictionaries in the office, neither one of which contained the word. I am at a loss to its meaning, hence trust you will enlighten me.

A suggestion perhaps, may be ventured, that most of us are very lax about referring to the book that Webster gave us.—KING S. PERRY, D.D.S., Pittsburgh, Pa.

## A Warning

A man using names "C. D. Martin," "A. MacLean," "B. MacLain," representing himself as our agent, is taking orders and making collections for our publications. He does not represent us although in possession of samples. He was last heard from in Sedalia, Mo. He is about 35 years of age, five feet seven, and weighs about 135 pounds. Dentists are warned against giving this party orders or checks on our account, but are urged to wire us should this man present himself and solicit an order.—THE C. V. MOSBY COMPANY, 3225 Pine Boulevard, St. Louis, Mo.

## The Child Campaign

Last month ORAL HYGIENE announced (on pages 307-8) a new activity having to do with a concentrated effort to carry the oral hygiene gospel to school children. Further particulars will be published next month.

# A Dental Man's Gift to Humanity

**M**R. GEORGE H. BOSCH, of Bosch, Barthel & Company, Australian dental dealers, has given two hundred and twenty thousand pounds sterling to the Sydney University.

His gifts to the University now total about two hundred and fifty thousand pounds. Only recently he provided for a chair of histology and embryology.

His latest gift is for the establishment of full-time chairs in medicine and surgery to provide a chair of bacteriology in the medical school, and laboratories and equipment for the promotion of medical and surgical knowledge.

Thirty years ago a watchmaker's apprentice in Sydney lost a friend by slow paralysis. The memory of that tragedy never left him. Out of it came the vow that if ever he got the opportunity to do anything that would help in the cure of paralysis he would do it. The apprentice, now a man of wealth, was Mr. Bosch.

Less than a year ago he gave twenty-seven thousand pounds to the University. It was thought a generous fulfillment of his vow, but he has now added to that gift another two hundred and twenty thousand pounds.

Mr. Bosch is intensely inter-

ested in medical research, and he is satisfied that Australia has the men to carry it out. On the occasion of his former gift, Mr. Bosch, a man of shrinking modesty, gave public expression to his views in the hope that other generous gifts might be encouraged to the same cause:

"We have the foundation there. The plant is growing, and it would be a crying shame were we to let it die for lack of necessary funds and equipment."

The recent gift to the University, made during December, was announced on the tenth of that month by the Chancellor, Sir William Cullen, at a dinner celebrating the seventy-sixth anniversary of the institution.

His latest gift places him among the most notable benefactors of the University.

"Only recently," said Sir William Cullen, "Mr. Bosch founded the chair of histology and embryology, and this gift is intended to promote the interests of medical teaching and training in the University. Mr. Bosch's new benefaction is given to establish full-time chairs in medicine and surgery, to provide a chair of bacteriology in the medical school, and laboratories and equipment for the promotion of medical and surgical knowledge."

# "Ask ORAL HYGIENE"

Conducted by

V. Clyde Smedley, D.D.S., and  
George R. Warner, M.D., D.D.S.,  
1206 Republic Bldg., Denver, Colo.



Please communicate directly with the Department Editors. Please enclose postage. Questions and answers of general interest will be published.

## Post-Operative Pain

*Q.*—Have been having a lot of trouble lately with post-operative pain. I use conduction anesthesia, I always paint the gums with iodine before making the injection and instruments are always thoroughly sterilized. I don't use anything to mop out sockets after extractions.

Does one have less post-operative pain after taking gas for extraction than when they have a local anesthetic?

Do you advise the use of stopain to swab out socket after extraction?

Is there anything that can be swabbed on the gum tissues that will eliminate pain in minor procedures?—W.T.W.

*A.*—We have substituted ST37 for iodine for this purpose. We believe it is better. Are you sure there is no alcohol or other antiseptic solution left in the needle following your method of sterilization? If the x-ray shows condensing ostosis around the root (which condition predisposes dry sockets and accompany after-pain) would suggest that you pack the socket loosely with a cone-shaped pack made by rolling between the fingers a piece of cotton impregnated with a stiff mix of the following sedative cement—formula as follows: Eugenic acid, thymol, iodine, oxide of zinc, and bismuth subnitrate.

Think there may be somewhat less likelihood of after pain follow-

ing gas extraction than with local anesthetic.

I am not familiar with stopain. 5% tutoxain is quite effective as an anesthetic when just swabbed on gum tissue.—V. C. Smedley.

## White Spots on Nails

*Q.*—Is there any connection between the finger nails and the teeth? A local physician told me today that if there are little white spots on the finger nails that it is always the sign of poor teeth. If there are no spots on the finger nails he claims they will have good teeth. Is this true?—H.C.L.

*A.*—I am sure that your physician is mistaken in his conclusion that poor teeth and the white spots that sometimes appear in finger nails are necessarily associated; though I must acknowledge that it would seem very logical to assume that the lack of normal calcification in the finger nails might be manifested similarly in the teeth, but I do not believe that clinical evidence will bear this theory out. At any rate I have personally observed a number of cases with exceptionally good teeth in the mouths of individuals, who at one time or another in their lives have had numerous white spots in their finger nails.—V. C. Smedley.

## Tic-Douloureux

*Q.*—I need help. Woman, age 70, housewife, health apparently good. The first part of July she was washing her face and when she brought the wash cloth over her right eyebrow she experienced great pain running from the eyebrow down to about the first molar region. She said it felt like she had run a splinter into her face. Then at intervals of about four days the same occurred in the same manner and by the latter part of July were occurring every day and she consulted her physician. About the middle of October he brought her to me to have her teeth examined as it seemed as the pain always centered in the upper right first molar. Radiograms were made of the right side which showed pulp nodules but the tooth was normal in other respects. The upper right first molar was extracted and the process of removing the tooth started another pain which lasted about half a minute.

Then for about a month she was all right and all at once pain started again. Now the trigger points are all of the nose, upper lip, touching the upper right first bicuspid, touching gum where former first molar was extracted and about half the time starts itself without anything coming in contact with the face. Pain seemed to center in the lower right second molar (the first and third having been missing for quite a while). This tooth was extracted and upon examination it showed the whole pulp calcified. While making the injection for the lingual nerve there was first a pain in that area and then from there it radiated all over the right side of the face and seemed to be very severe and lasted about a minute. After that, the tooth was painlessly removed.

This looks like tic-douloureux and I would like to know if the teeth could be the cause of the trouble and if the teeth were all re-

moved and the trouble would continue would there be any way of obtaining permanent relief and cure or would there have to be an injection made in the ganglion or nerve sheath for temporary relief?

These pains have never occurred at night.—C.N.H.

*A.*—The case cited in your letter of the 24th, seems to me to be one of tic-douloureux. The *touch* spots are the classical spots and all of the other symptoms are in line with the usual symptomatology of this condition. The possibility of pulp nodules being causal is disputed by some and contended by others. Dr. Earl Spencer of Pueblo cites a case in which the trigeminal neuralgia persisted in spite of various treatments until all of the teeth with pulp nodules were removed, when the condition cleared up spontaneously. On the other hand other men report removing teeth with pulp nodules without having any effect. If the teeth are otherwise healthy, I would hesitate to remove those with pulp nodules, expecting to clear up the condition. A case such as yours is usually relieved only by the injection of alcohol or the operation of the gasserian ganglion.

—G. R. Warner.

## Novocain Dermatitis

In the December issue of the ORAL HYGIENE there is a question relative to novocain dermatitis signed J.U.M. and having had a severe case myself several years ago I herewith give you some friendly comments on the treatment of this condition and if you care to, you may forward this letter to J.U.M.

It was some time before I discovered the cause in my case and I was almost on the point of giving up my practice. I tried a number of different combinations locally and the one that gave the most relief, in fact it acted almost as a specific, was a solution of alcohol (95%) and salicylic acid, 20 gr. to

the oz., applied as often as necessary.

At this time I was using a metal type syringe which leaked a little. I threw this away and got one that did not leak and was very careful not to let the novocain solution come into contact with the skin when mixing the same or making an injection. Just as soon as I made an injection or handled the novocain in any way, I would wash my hands thoroughly. My dermatitis was soon a thing of the past and I have had no more trouble since, until a few weeks ago I noticed the end of my left index finger was becoming irritated.

The very next injection I made I paid strict attention to technic and found I had got into the habit, when making injections through the mucobuccal fold, of placing the end of this finger somewhere near the point of entrance for the needle. Consequently the few drops leaking from the tissues came into contact with the skin.

I now use, when making such injections, a piece of gauze or cotton over the end of this finger and have had no further trouble. And incidentally, the only proper way to locate the mucobuccal fold is by using the cotton or gauze around the finger so that the cheek or lip may be pulled back thereby exposing the proper point of entrance for the needle.

It serves a double purpose in my case. I do not use the carpule method myself but a great many men do and this method might be of some benefit as it does away with handling the solution.

The treatment you give is good. You know I think the suprarenin is as much, perhaps more, to blame than the novocain. I am of the opinion that anyone can easily overcome the dangers of this condition if they will pay strict attention to technic and keep the solution from coming into contact with the skin when making the different injections. At least I have demonstrated this in my case.—S.J.H.

*A.*—I appreciate very much your kind and helpful letter, which I will send to ORAL HYGIENE for publication so that all of the readers may have the benefit of your experience in treating your own case of novocain dermatitis.

I might have gone into the subject very much more exhaustively than I did in answer to J.U.M., but it is our desire to have the replies to these questions reasonably brief. I have had men report to me that they have such an idiosyncrasy for novocain that they developed a dermatitis even when wearing rubber gloves. I have had others report that they suffered from dermatitis even though they exercised the same care which you exercised in not allowing the novocain to ever come in contact with the skin. There have been two very pitiful cases reported of dentists attempting to treat this condition by x-ray therapy and thereby suffering the loss of the use of their hands. Isn't it surprising what a supposedly well educated man will do?—G. R. Warner.

## Does Not Agree

I agree with you in most matters in your reply to E.J.G.\* as to how soon after extraction to insert dentures, except in your method of re-basing temporary dentures and recommending them as permanent.

We all know the inevitable reactionary inflammation which necessitates a fuller appearance in the anterior or labial of temporaries than we can expect of the permanents (after the alveolar resorption and full granulation of the soft tissues). Although relining will satisfactorily fill in the vacancies created by the popularly called shrinking of the gums, still, the outer or facing portion of the average temporary is by far too difficult to correct.

Usually we find the puffed appearance cannot be ground away,

\*December, 1929, ORAL HYGIENE, p. 2339.

since the labial portion of a temporary is of necessity thin to reduce the anterior bulging effect. All told, I find more pleasing and esthetic affects are obtained through new or permanent plates, lined up correctly with the idea in mind to maintain the natural anterior lip position.—W.J.V.

*Q.*—I wish to thank you for your contribution to "Ask ORAL HYGIENE."

As a matter of fact, we usually do make new sets at the time rebasing is required. I always recommend that they have new dentures at that time, and later have the first set rebased to keep in reserve as an emergency set.

It is quite evident that you are not getting your extractions made by the same surgical procedure that we use in our office with mouth preparation by the reduction of excess labial process. In most cases I find that in from two to four weeks after extraction, I have very little to interfere with my setting the teeth and contouring the labial gum as required for the best esthetic effect.—V. C. Smedley.

### A Cyst



*Q.*—I am enclosing x-rays which I diagnosed as a cyst on a superficial examination. Greenfield says that a cyst can be differentiated from the antra by the fact that the antra are symmetrical. What I

have surely can't be the antrum and yet it is so symmetrical and balanced that I am unable to be sure of a diagnosis. There is no history, the only fact being that the cyst (?) was brought to light with a full mouth x-ray. Therefore, what have I and what should I do with it? Thank you for any light you throw on the subject.—H.J.S.

*A.*—The case presented in your letter of the 22nd, and which is illustrated by radiograms, is undoubtedly that of a cyst. It is not in the region of the maxillary sinus and moreover has all of the radiographic details of a cyst. It probably results from infection which originated before the extraction of the incisor teeth. As these cysts have a tendency to increase in size, with the passage of time, it would be wise to have this particular one operated, and unless you are accustomed to this type of work it would be the part of wisdom to refer the patient to an experienced oral surgeon.—G. R. Warner.

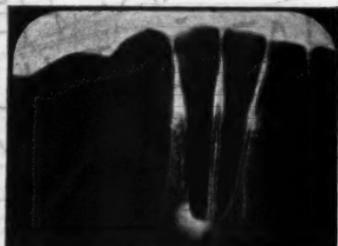
### Broach in Root Canal

*Q.*—In treating an abscessed lower left incisor, I broke off a canal file. Previous to the accident I had given one treatment of formic creosol. The patient is 21 years of age. Am enclosing x-rays showing case before and after accident.

Would you extract the tooth or is it possible to remove the file end with  $H_2 SO_4$  50 per cent? Is the acid sealed in for a few days? Kindly state the exact technic if you think it is advisable and can be done.—W.G.G.

*A.*—A broach broken as far in the canal as that of your case would be very difficult to remove with any kind of treatment. The probabilities are that the acid treatment would destroy the root of the tooth before the broach would be affected enough to be removed. It is sometimes possible to rust out a broach with iodine, but this is a

long and tedious process, and after all is said and done the tooth under consideration in your case really ought to be extracted. The lamina dura is destroyed and I believe



there is destruction of the cementum and possibly some of the dentine. So even if you succeed in removing the broach, you would never have a healthy root apex.—G. R. Warner.

### Exposed Antrum

*Q.*—Patient had a tooth extracted, right upper, second molar, over two years ago. The third molar is in place in normal condition but as yet the space of the second molar has not closed. Instead, the gum has receded, the space seems twice as large and you can see to the apex of the mesial root of the third. He is compelled to keep the socket packed with cotton at all times, in order that air, water, etc., do not pass through and down the nose. It does not show signs of inflammation, only will not fill in and protect the nose and head.

Please give information as to the treatment of such a case.—D.E.S.

*A.*—This patient should be referred to an experienced oral surgeon. If the antrum is not suppurative, and if the exposed apex of the third molar is not infectious, the proper procedure for the oral surgeon to follow will probably be to freshen the edges of the orifice and detach a section of healthy tissue in the palate—shift it over and suture it to place completely closing the old tooth socket. This flap of tissue need not and should not be completely detached from the palate, but just enough to permit it to be rotated and shifted into place.—V. C. Smedley.

### Burning Denture

*Q.*—I have a woman patient, who has been wearing vulcanite dentures a year. I did not make them. She has been troubled with a severe burning in the mouth ever since they were put in.

Recently I constructed hecolite dentures and for the first two weeks she did not complain but now the burning returns. Both vulcanite and hecolite sets were O.K. except for this.

Do you think it might be the coloring material in the dentures? If so, would white rubber help?—T.O.M.

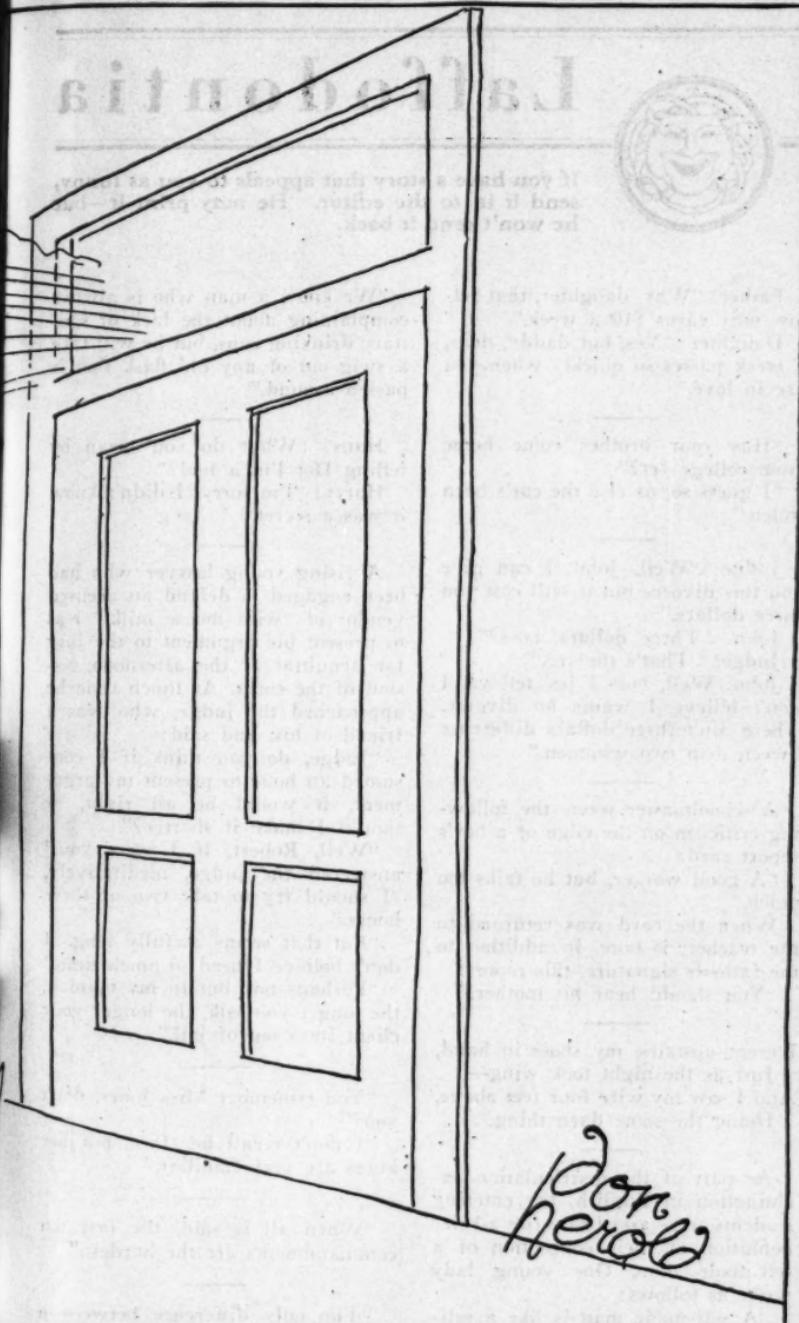
*A.*—These pressure and burning sensation cases are very baffling at times. Usually they can be relieved by careful trimming for relief of nerve pressure—checking the occlusion to be sure there is no shifting of the denture base during mastication. I think we should not attempt a very tight-fit in these cases.

In some mouths pigmentation may be a causing factor. Black, herakles or natural base are more nearly the natural color of the rubber and therefore contain the least if any pigmentation. White rubber would not have sufficient strength to use in making an entire denture. A gold base is preferable but even gold does not necessarily and assuredly always bring relief.—V. C. Smedley.

HA! HA! HA! HE!  
THAT DRILL  
IS TICKLING ME



Sound effects in a dental office.



Drawn for ORAL HYGIENE by Don Herold.



# Laffodontia

If you have a story that appeals to you as funny, send it in to the editor. He may print it—but he won't send it back.

Father: "Why, daughter, that fellow only earns \$10 a week."

Daughter: "Yes, but daddy, dear, a week passes so quickly when you are in love."

"Has your brother come home from college yet?"

"I guess so, or else the car's been stolen."

Judge: "Well, John, I can give you this divorce but it will cost you three dollars."

John: "Three dollars, boss?"

Judge: "That's the fee."

John: Well, boss I jes' tell ya, I don't b'lieve I wants no divorce. There ain't three dollars difference 'tween dem two wimmen."

A schoolmaster wrote the following criticism on the edge of a boy's report card:

"A good worker, but he talks too much."

When the card was returned to the teacher, it bore, in addition to the father's signature, this report:

"You should hear his mother."

I crept upstairs, my shoes in hand,  
Just as the night took wing—  
And I saw my wife four feet above,  
Doing the same darn thing.

As part of the matriculation examination in English, the entering students were asked to write a brief definition of their conception of a self-made man. One young lady wrote as follows:

"A self-made man is like a self-made cigarette—just a lot of Bull wrapped in a transparent cover."

"We know a man who is always complaining about the lack of sanitary drinking cups, but he will take a swig out of any old flask that is passed around."

Hans: "What do you mean by telling Dot I'm a fool?"

Harry: "I'm sorry, I didn't know it was a secret."

A rising young lawyer who had been engaged to defend an accused vendor of "wild moose milk," was to present his argument to the jury for acquittal at the afternoon session of the court. At lunch time he approached the judge, who was a friend of his, and said:

"Judge, do you think if I consumed an hour to present my argument, it would be all right, or should I make it shorter?"

"Well, Robert, if I were you," answered the judge, meditatively, "I should try to talk two or three hours."

"But that seems awfully long. I don't believe I need so much time."

"Perhaps not, but in my opinion, the longer you talk, the longer your client stays out of jail."

"You remember Miss Jones, don't you?"

"I don't recall her face, but her knees are very familiar."

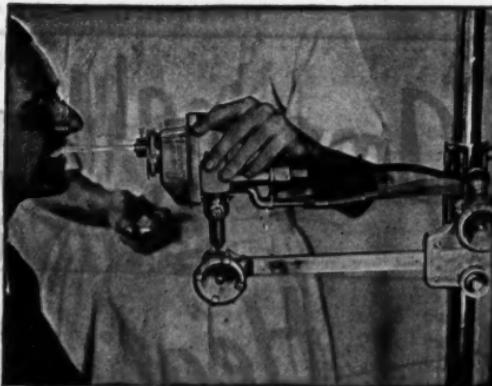
"When all is said, the first ten commandments are the hardest."

"The only difference between a rut and a grave is the length of the rut."

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The positive proof lies in a test. Without such a test, it is impossible for you to fully appreciate the accuracy of our claims. We will send you free sample if you will try it. The more severe the test, the better we like it!

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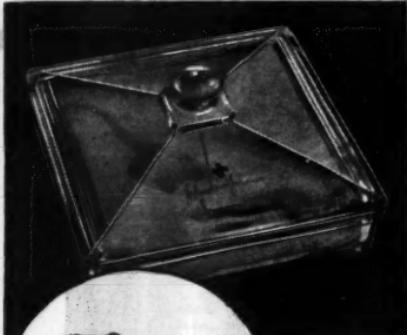
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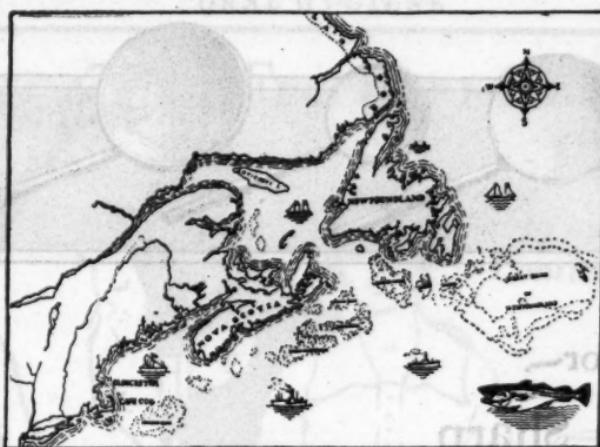
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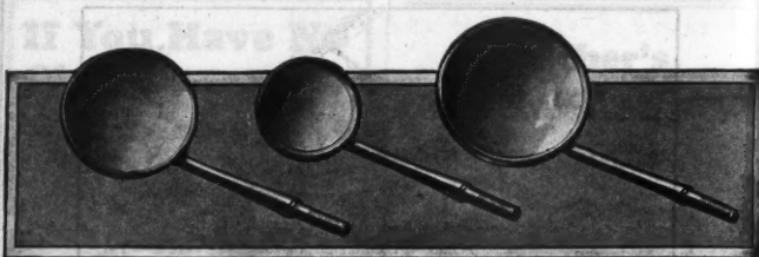
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But, if Dentistry is not to be handicapped by the idea that dentistry and pain are synonymous, freedom from pain must *continue beyond the dental chair.*

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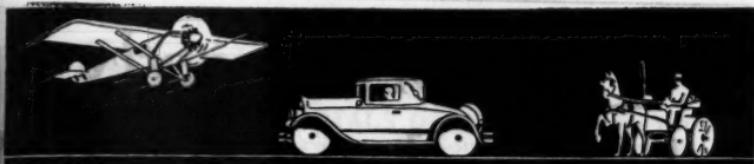
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According to reports received from dentists the mouth is sprayed with a 1 to 20 dilution of Atomidine, being careful to thoroughly spray out all surfaces between the teeth. After drying the ulcerated surfaces, the gums are swabbed with full strength Atomidine, or better still, compresses of cotton films moistened with the pure solution are applied for five minutes; this procedure is repeated daily and patient is instructed to use Atomidine, 15 to 30 drops (one or two medicine droppers full) to 1/3 glass of cool water, as a mouth wash three times a day. Cases of Vincent's Angina treated in the above manner have cleared up both clinically and bacteriologically, showing negative cultures after the third day.

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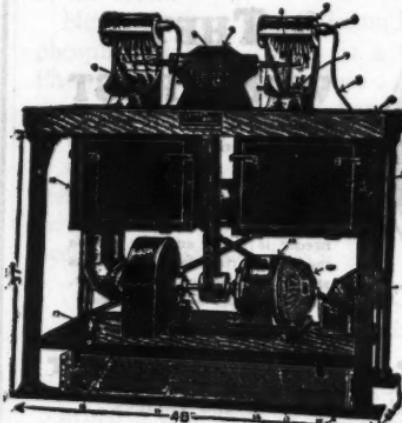
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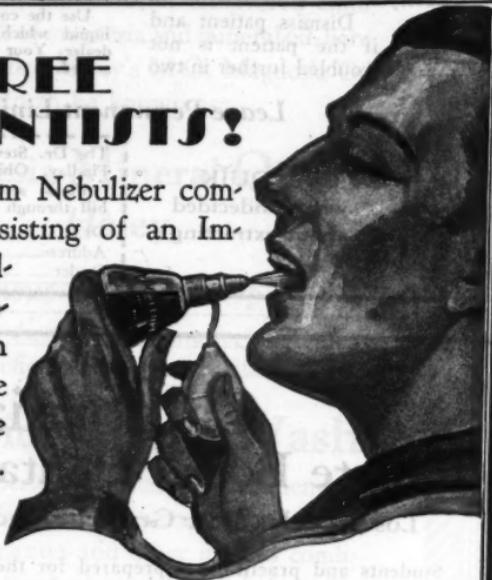
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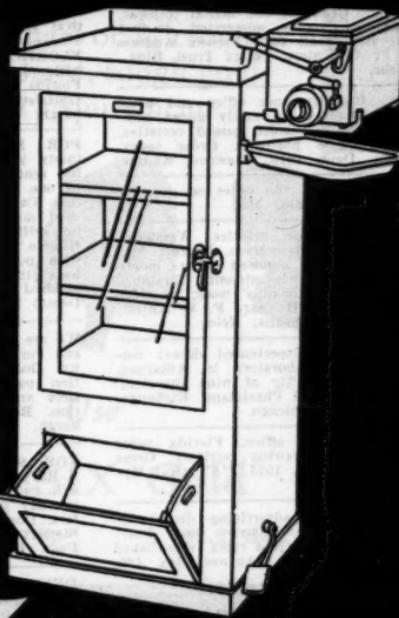
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**DENTAL MECHANIC:** eighteen years experience, thorough; desires position with New York dentist. "20" Oral Hygiene, Pittsburgh.

**FOR SALE:** Missouri practice and equipment, good town, twelve miles from St. Louis. Population twelve hundred, only dentist here, doing nice business. "2" Oral Hygiene, Pittsburgh.

**WANTED:** A dentist with a Mississippi license. "P" Oral Hygiene, Pittsburgh.

# DEE GOLDS

SCIENTIFICALLY COMBINED AND TESTED

For the M.O.D. Inlay

Carmichael or  $\frac{3}{4}$  crown  
where hard, tough gold  
is a requirement



Use

**DEESIX Gold**

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\$1.55 dwt.

DESIRABLE CASTING QUALITIES  
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INSURE LASTING SATISFACTION

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**DEE & CO.**  
Precious Metal Specialists  
CHICAGO



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## Less trouble with Oral Surgery

THE oral cavity is generally conceded to be the most difficult part of the body to keep sterile.

Darkness, body heat and moisture make it an ideal place for bacteria to multiply.

Regardless of how carefully you guard against infection during an operation, there is always the possibility of post operative infection.

SODIPHENE will prevent chance infection from gaining a foot-hold.

SODIPHENE is mild and soothing and will not irritate even the most delicate tissue. Nature is given an opportunity to granulate new tissue.

Since SODIPHENE can be obtained at practically every drug store, you can prescribe it for home application and suggest its general home use.

# Sodiphene

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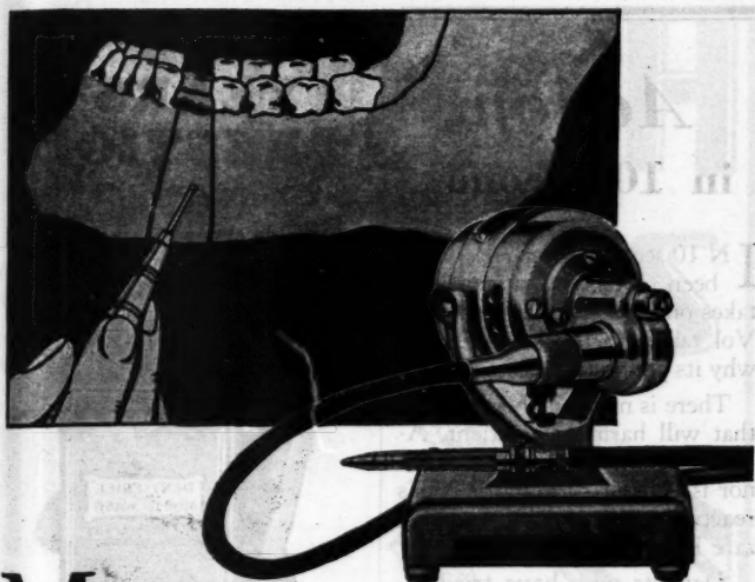
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# Mandible Resection *Expedited*

*The Dumore Surgical Engine is adaptable to every case of bone surgery!*

Because of its portability and great stamina, the Dumore is used

by dentists in operating rooms, laboratories, on journeys, and in hospitals.

It may be used to great advantage in the resection of portions of the mandible, in correction of extreme cases of protrusion, and bony ankylosis of the temperomandibular joint. The adaptability of the Dumore makes it suitable for every case of bone surgery, from the most minute and intricate to that entailing a large portion of bone.

The Dumore has a 20 to 1 gearing device which reduces the bur speed to a rate which will not cause over-heating in bone cutting. The torque of the engine is increased to give it a strength that will not allow it to stall on any surgical case. The Dumore is used and recommended by leading dentists because it simplifies the operation, makes possible cleaner excision, causes less shock to the patient, and produces less trauma and post-operative pain in the tissues. Write for valuable facts of Dumore service.

WISCONSIN ELECTRIC COMPANY, 32 Sixteenth St., Racine, Wis.

**DUMORE**  
TRADE MARK—REG. U. S. PAT. OFF.  
Dental Equipment

There is a Dumore Dental Motor for every dentistry need. Ask your dental depot, or write us direct.

## Action in 10 seconds

**I**N 10 seconds after A-Vol has been taken, action begins. It takes only 10 seconds for an A-Vol tablet to break up. That's why its action begins so quickly.

There is nothing about A-Vol that will harm any patient. A-Vol is not a heart depressant nor is it habit forming. A-Vol's reaction comes quickly and in a safe harmless way.

Dentists who have tried A-Vol are enthusiastic about results. It has proven very effective as a nerve quietizer before operations. They give their patients an initial dose before sending them home after any oral surgery.

We want to give every dentist an opportunity to try A-Vol at our expense without incurring obligation. Just mail the coupon for a free trial package.



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Please send free trial package of A-Vol.

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## SIX YEARS' PRESTIGE



## PY-RO-DON

Produced by the Original Promoters of rose colored saline dentifrice-wash, the name Py-Ro-Don was adopted two years ago, when improvements and refinements in the earlier preparation were effected without departure from the Original Formula. Its superiority promptly won authoritative recognition. Our volume of sales enables us to retail Py-Ro-Don at 75c. Why pay more for a substitute?

## Original Brush

Obtainable only in Py-Ro-Don. Scientifically designed and made by Cauvigny over six years ago this high-grade French tooth brush with bone handle and specially selected bristle invites comparison with machine made imitations in celluloid and obviously different bristle, seeking to compete in price—50c. Why pay the Py-Ro-Don price for imitations?

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**THEY'RE  
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What greater tribute can you pay an instrument than that. BUSCH BURS are accurately cut, finely finished to give maximum service. You will like their satisfaction at low cost.

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Send accurate models

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Elizabeth, N. J.  
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## BREWSTER CEMENT

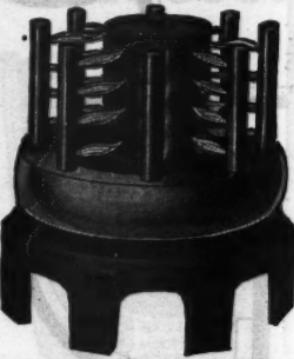
A Dental Cement possessed of a high degree of adhesiveness — free from granulation and heat in setting, very hard and dense and can be mixed to a thinner consistency with ample strength. An ideal Cementing medium.

Your orders solicited through your Dental Depot.

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are produced with the even and thorough heat of the  
**TORIT WAX ELIMINATOR**  
Used by Dentists and Schools Everywhere



No. 46—for City Gas      EITHER STYLE  
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**Gingivitis, Vincent's Infection**

**Extraction Sockets**

**Ulcerated or Septic Oral Conditions**

Literature upon request.

Obtainable at your nearest Dental Supply Depot or

**RARE CHEMICALS, Inc.**

NEPERA PARK

YONKERS, N. Y.

## Children take to this new way of cleaning their teeth



*Mouth hygiene is recognized as being a most important element in the health of growing children. The Calsodent method is not only the most effective agent in mouth hygiene but has the striking advantage of appealing to the child's natural love of play.*

ONE of the biggest problems of preventive dentistry is inducing children to take adequate care of their teeth. No matter how excellent the diet or how sound the tooth structure, teeth must be given daily brushing if they are to be preserved. The best that has been offered the profession so far has been a group of dentifrices with a candy-like flavor. But even this has not proved a sufficient inducement for systematic daily use.

In the study of child psychology it has been found that those things which can be made to seem like play are taken up most avidly. Brushing the teeth with a candy flavored tooth paste is not play. In Calsodent we have a preparation and a method of use which were developed along scientific lines without being primarily intended for children. It happens, however, that the Calsodent method and formula make a strong appeal to the child's love of play. The measuring of a capfull of Calsodent, the

addition of water with the development of the beautiful red color, the change of the color with rinsing, and finally the very agreeable, though not candy-like flavor—there is something about all this which has a strong appeal to the child.

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Thus it would appear that in Calsodent we have a very effective weapon in the battle against decay and mouth infection. It is the most effective agent for destroying mouth acid which is at the same time entirely safe. Its beneficial effect on the circulation in the gum tissue is an indirect, but nevertheless definite, aid in providing a normal environment for the teeth while erupting, and at a most vulnerable time.

Those of your patients who have children will appreciate your telling them about Calsodent. If you have not already learned about this new method, you owe it to your patients and yourself to become acquainted with it.

**The Odontex Products Corp.**  
315 Fifth Avenue, New York City

Enclosed please find \$1.00 for which you are to send me one full size \$1.00 bottle of Calsodent, two regular 50c Calsodent-Odontex brushes and a copy of "The Modern Conception of Periodontal Diseases."

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YOU have had a variety of experiences with your porcelain work in the past. That's why we are so anxious to have you give Lochhead a trial.

Be critical—compare—judge your Lochhead restoration by every standard—we feel confident that you will agree with the great number of practitioners who are enjoying the excellent service rendered by our six complete laboratories.

***We repeat . . . try Lochhead for that  
Next Porcelain Restoration***

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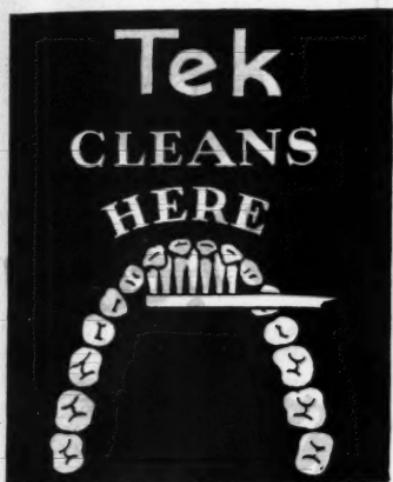
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18-20 W. Seventh St.

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120 Boylston St.

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Even behind the incisors, on the sharpest curve of the dental arch, Tek cleans swiftly and surely because, with its shorter brushing head, all bristle tufts can take an active part in every stroke. And, due to the closer contact of bristles thus possible, not only the surfaces but the interproximal spaces are swept clean.

Ten yards of dental floss in the handle of one Tek model is a constant reminder to use floss whenever the teeth are brushed.

**Johnson & Johnson**  
NEW BRUNSWICK, N. J. U.S.A.

Use the coupon to get 2 Tek brushes (one with and one without the floss feature) at a special price to the profession only.



JOHNSON & JOHNSON, New Brunswick, N. J.

Enclosed find my check (or Money Order) for \$1.00 for special offer of one Tek Dental Floss Brush and one Tek Brush (without floss feature).

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Rich In  
Gutta Percha  
Adheres Tightly to the  
Cavity Wall  
Stays Put  
So Long As It Ought To  
Non-Contracting  
Non-Irritating  
Wears Well

EVEN WHEN EXPOSED TO  
CONSIDERABLE ATTRITION  
WORKED WITHOUT MUCH PRES-  
SURE AND WITHOUT INCONVENI-  
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Six oz. Glass Jar ..... \$2.00  
One oz. Package ..... .40

WHEELS!  
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WHEELS!  
HEATLESS  
WHEELS

THE WORTH WHILE WHEELS  
COOL, FAST-CUTTING HEATLESS STONE  
WHEELS THAT GIVE YOU JOY TO USE

LOOK FOR THE NAME!  
INFERIOR SUBSTITUTES ARE OFFERED  
DEMAND GENUINE HEATLESS WHEELS



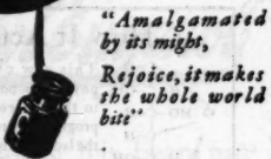
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MIZZY, Inc., 105-107 East 16th Street, New York

# CRESCE<sup>N</sup>T ALLOY

*The Tooth Saver*

30  
Years of  
Success



Superior Edge Strength

\$2 per oz. Bottle

\$9 per 5 oz. Jar

CONICAL  
NEEDLES  
ARE  
STRONGEST  
MAY BEND  
BUT  
DO NOT BREAK

RUSTLESS  
NO WASHERS  
ALL GAUGES IN ONE  
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TWIN-POINT  
STYLE IN  
BIG DEMAND

ALSO  
HUB, SCHIMMEL  
AND LUER TYPES

\$2.00 Per Dozen

# Fleck's Cement holds and how!

In August, 1906, I filled several teeth with Fleck's Cement, also cemented on a crown on a broken down molar which came off in a year or two leaving cement on tooth that preserved it for many years. All of these teeth were well preserved so far as the cement was concerned. It mixes so easy when you know how!

Dr. L. H. Goodrich,  
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January 11, 1929.

SOLD AT ALL DENTAL DEPOTS

MIZZY, Inc., 105-107 East 16th Street, New York



# Cleans ONLY

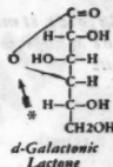
... but LACTONA does that *better* than anything else you know. A sound, modern, scientific reason supports this claim. And *no other* dentifrice acts like it.

*Penetration*, into crevices and corners—places that no tooth brush or any other dentifrice has ever reached—is Feature No. 1.

Colloidal (chemico-physical) action *crumbles* the mucin plaque into tiny, non-adhesive particles that can no longer stick to teeth, thus four-times easier removal—is Feature No. 2.

Galactonic lactone, a rare new ingredient in a dentifrice, is the basis of it.

## How It Acts



This new chemico-physical action is due to the pH controlled progressive breaking of the lactone\*ring in contact with the film, which acts as a specific colloid to crumble it.

## Proves Your Work Superior

Never before have you had a dentifrice to recommend for home use that so well proves the thoroughness of your own prophylactic measures. Patients see lasting effects because LACTONA prolongs results of your work long past the usual time. Credit goes to you. Patients tell their friends. They, too,

come to you. Thus LACTONA actually helps to increase your clientele.

LACTONA contains no harsh abrasives, soaps, strong acids, alkalies; or anything else to injure teeth or gums. Harmless if swallowed, so excellent for children. Does not affect the saliva. Persons with thick,ropy saliva are most benefited by it.

## To Dispense Personally

If you find it more convenient to dispense LACTONA personally (permanently, or until all drug stores stock it) just fill out coupon below for one dozen at the dealer's price. Thousands of

dentists are now doing this. Or, if you have not tried LACTONA, check coupon for full size free tube. See how LACTONA cleans, whitens and beautifies the teeth.

# LACTONA

Galactonic Lactone Dentifrice

*Successor to Tooth Paste*

THE LACTONA COMPANY,  
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Please send me full size 50c tube free to try.   
Please send 1 doz. Lactona at \$4.00. Enclose  
check, if convenient, to avoid bookkeeping.   
Please check mark in square opposite your choice.

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# ONE OF A DOZEN USES FOR *Carbol Eugenol*

After cavity has been prepared and is still very sensitive take impression for inlay and fill cavity with Carbol Eugenol mixed thick. When inlay is ready to set, the Carbol Eugenol is easily removed with an excavator and sensitiveness will be gone.



Price in U.S.A.

Large Size . . . . \$3.00  
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"Any Dealer Anywhere"

Prepared by

**King's Specialty Co.**

Fort Wayne, Indiana, U.S.A.



## Easy To Use

One Shield covers the entire headrest. It slips on without any trouble and can't slip off—

## D. C. B. Sanitary HEAD SHIELDS

Cost less than unsanitary towels besides being more sanitary. \$2.00 per hundred.

Made for all chairs.  
Order from your dealer or use the coupon.

DAVID C. BAKER,  
665 Fifth Ave., New York

I enclose \$2.00 for which kindly send me 100 D.C.B. Sanitary Head Shields.

My chair is \_\_\_\_\_

Dr. \_\_\_\_\_

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OH-3-29

**How to use TATE'S PULP SOLIDIFIER**

Devitalize or anaesthetize the exposed nerve—remove pulp chamber contents ONLY and fill with SOLIDIFIER. Tooth is now ready to crown or fill.

X-rayed teeth—SOLIDIFIED 10 YEARS—showed no apical changes.

\$1.50 per jar—with complete directions—from your dealer or  
THE TATE DENTAL DRUG CO., SOMERSET, Ky., U.S.A.

## Better Crowns at Low Cost

THE cost of Reynolds' Anatomical Gold Shell Forms is only slightly more than the cost of the gold in them.

The natural contour feature is one which makes Reynolds' shells stand out as distinctly different from all others since this feature is possessed by no other similar product.

S. H. Reynolds Sons Co., 100 Boylston Street, Boston, Mass.

Yet get the best at a moderate cost. Your patients will appreciate the anatomical feature as well as you do, although it will be from the lay view-point.

*May we send you our latest catalogue and price list? It is yours for the asking and there is no obligation connected with this offer.*

Note the  
Contour



## Premier Ela BURS are VERY SHARP

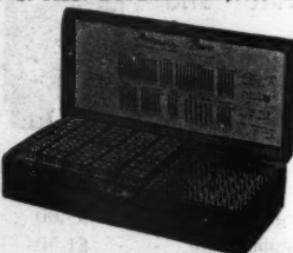
BECAUSE THEY ARE STONED. They have a sharp, special feature cutting edge making them sharper than any bur on the market. They cut rapidly, clean and smooth, and require less pressure than other burs. They will not heat up, and cause very little irritation to the patient.

PLAIN BURS \$7.20 Gross C. C. FISS. BURS \$9.60 Gross



In a beautiful nickel plated metal case. 4 dozen each round, inverted cone, C. C. Fiss. Burs, one-half for hand piece and one-half for right angle.

ONE GROSS SELECTION \$9.00



In beautiful mahogany case, 16 dozen each round, inverted cone, C. C. fissure. One gross in removable block and three gross packed in one dozen cartons.

FOUR GROSS SELECTION \$29.50

Buy through your dealer or order direct.

WRITE FOR FREE SAMPLES

### THE DENTAL AGENCY

Manufacturers, Importers and Exporters

"PREMIER" Burs, Hand Pieces, Mirrors, Stainless Steel Instruments, Mandrels, Forceps, Etc.

900 CHESTNUT STREET

Established 1913

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Where a fairly hard  
gold is needed.

Slightly harder  
than 22Kt. gold.  
Can be burnished.

Fusing Point  
1850° F.

Per DWT.  
\$1.10

Sold by  
better  
dealers  
every  
where

Jelenko  
Special  
Inlay Gold

Where a soft  
gold is desired.  
Harder than pure  
gold; yields readily  
under burnishing.  
Fusing Point 1900° F.  
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Manufacturers and Refiners of Dental Golds  
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Special attention given to

### Nitrous-Oxid-Oxygen

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Holding its own weight  
and a full set of uppers.  
A real test  
for lowers.

Eureka Suction Co.  
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## DOCTOR Test the Sample of Campho - Phenique



IT IS a notable germicide, an efficient anti-septic, a non-irritant; a decided local anaesthetic; insoluble in water or glycerine; does not discolor or stain; is possessed of an agreeable odor and not a disagreeable taste—and maintains an unchanged integrity. It is recognized as wonderfully adapted to a large proportion of all dentopathological conditions, from sensitivity of dentine, through the varying conditions of pulp irritation, pulp devitalization, pericemental irritation, alveolar abscess and caries, or necrosis of contiguous osseous structure

*Samples to dentists on request  
Send your card or a postal.*

Campho-Phenique Liquid, 4 oz., \$1.20  
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## The Body Won't Stand It!

THOUSANDS of blows on the hard floor as you walk around the chair each day will finally take its toll.

Foot burn, leg weariness and pains are the price you pay and needlessly.

Why not let an E-Z Mat absorb these thousands of blows? You will feel fresher at the close of the day.

Every Stand E-Z Mat is a full quarter inch thick of tough, resilient durable rubber.

Ask your dealer to show you a Stand E-Z Mat, or send the coupon for prices and details:



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Please send me, without obligation, details and prices of the Stand E-Z Mat.

Dr. \_\_\_\_\_

Address \_\_\_\_\_

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## A Welcome Aid to Mothers for the Care of Baby Teeth

When you suggest to the mother the use of Babydent, you insure the necessary daily cleanliness for the important temporary teeth.

Babydent was designed expressly for the needs of baby mouths. It is a mild but efficient cleanser, free from soap or strong ingredients. Its taste is so pleasing that the infant will sit quiet and permit the teeth to be thoroughly cleansed. Babydent comes in a form convenient for the mother to use; she applies it with soft, woven Finger Applicators.

Your name on the margin below brings informative booklet.

### Childent Company, Inc.

Granville, N. Y.

Formula of R. J. Vaughan, D.D.S.



**Babydent**  
for BABY GUMS and TEETH

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O. H.

Name \_\_\_\_\_

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## IN CONSTIPATION

*Try a Tonic-Laxative*

**W**

HEVER a laxative is indicated to overcome constipation, or to prevent intestinal toxemia, and as a general hygienic measure in the course of dental treatment

### A G A R O L

the original mineral oil emulsion with phenolphthalein, not only softens the intestinal contents but *gently stimulates* the peristaltic action and thereby aids in re-establishing normal bowel function.

The agreeable taste and the convenience of using Agarol have made intestinal hygiene a safe and desirable therapeutic measure in dental practice. We will

gladly send you a liberal quantity of Agarol to convince you of its merits.



**WILLIAM R. WARNER & CO., INC.**

*Manufacturing Pharmacists since 1856*

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# MOUTH and GUMS TENDER ?

As an aftermath of the epidemic, dentists are finding that colds and flu often leave the delicate membranes raw. To improve this condition, tell your patients to MU-COL-IZE frequently with this solution—a teaspoonful of MU-COL to a glass of warm water as a mouth wash, nasal douche, and gargle.

Thousands of dentists now recommend MU-COL after extractions and for keeping the mouth and teeth in a hygienic condition.

MU-COL has many uses, as explained in our booklet, which make it very helpful in your practice.

## MU-COL

*Agreeable - Economical - Refreshing*

Sample makes six quarts of mouth wash, and is yours without obligation.

THE MU-COL CO.  
Tupper and Edwin Place, Buffalo, N. Y.

OH-3-9

You may send the free testing sample.

D.D.S.

Enclose card or letterhead.



## AT LAST A SUCCESSFUL SURFACE ANTISEPTIC-ANESTHESIA

Desensitization and sterilization within 3 minutes—doesn't destroy tissue. Enables you to use needle without pain to patient. For scaling, opening abscesses and before applying plaster, fills a long felt need. Fully tested and approved.

F. A. Dicks & Co., 433 Bourbon St., New Orleans, La.

Write For  
Free Trial  
Bottle ...

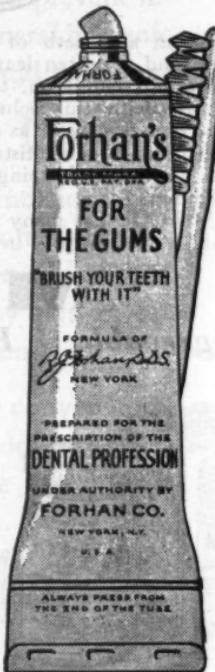
## NOVOTHESIA

# That the Public may know

Ethics of the dental profession forbid the exploitation of dental skill and knowledge. So it is the responsibility of commercial organizations identified with the practice of oral hygiene in its most comprehensive form to carry to the layman the importance of preventive dentistry supplemented by daily care. This, the Forhan Company, maker of Forhan's for the Gums, Forhan's Pyorrhea Liquid, Forhan's Antiseptic Refreshant, is doing to the best of its ability—via magazines, newspapers and radio.

*Formula of R. J. Forhan, D.D.S.*

Forhan Company, New York  
Forhan's Ltd., Montreal



*Your Teeth Are Only as Healthy as Your Gums*



Forhan's Pyorrhea Astringent is a recognized healing adjunct in the successful treatment of Pyorrhetic conditions. Its use is restricted solely to dentists.

**Forhan's**  
FOR THE GUMS

## HARPER'S UNIVERSAL TRIMMER



(The above cut is two-thirds size)

The thin flexible blade rotates in its socket to give easy access for trimming to form and finish ALL the margins and approximal surfaces of ALL the teeth.

Perfection of approximal form and finish is made easy and this instrument will earn its cost in the time it will save in ONE day's use.

*The Trimmer may be had from your dealer or direct. If you place your order direct, please give your dealer's name.*

Price complete \$1.50, extra blade \$.50

DR. WM. E. HARPER, 6541 Yale Ave., Chicago, Ill.

## Holding the Mirror Up to Nature

Your patient would as soon have you use bright green rubber for the gum shade on his plate as to use a pink that was off color.

Your plates must be as near Nature as possible—which means you must use a superior rubber.

### Eugene Doherty's New Improved Pink Rubbers

in light and medium light shades, fully answer every possible requirement in the making of gum shades for plates. Not only do they make the most natural plates, but they are tough and durable to a remarkable degree.

Eugene Doherty Rubber Works, Inc.  
110-112 Kent Avenue, Brooklyn, N. Y., U. S. A.  
Address all correspondence to Dept. B.



## Suppose Cleopatra,

*had smiled on Antony  
and revealed disfiguring teeth!*

**B**OTH history and romance would have lost one of the world's classics. This charming Egyptian queen could not have saved her people with her beauty while Rome fumed, nor would Antony have sacrificed his country's prestige and his own career if Cleo's teeth had repelled!

History, both ancient and modern, is filled with intriguing examples of the compelling power of beauty and appearance, and no one ever wielded such power unless one of the most important aids to beauty—the teeth—were at least sufficiently fine to escape unfavorable notice.

## Trubyte

are helping Romance and History today!

Your patients are men and women, each with his little tragedy or romance, each a king or queen in the hidden depths of imagination, and each striving for or hoping to retain the beauty or appearance that means happiness—yes, in some cases, even existence!

When you realize the influence of your service on Appearance and how all normal people are striving to improve or retain their Appearance, you will look upon Trubyte Teeth as your staunchest aid, because they restore and retain Appearance. That is what every patient wants.

If you will realize that Cleopatra bought the freedom of her people with her beauty, and that Antony valued that beauty above victory, prestige, patriotism and an honorable career, you may form some conception of what Trubyte Teeth can do for you. People pay high for Beauty now, just as they did in 30 B. C.

RESTORATIONS  THAT RESTORE

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of NEW YORK

## THEY PAY AS THEY GO

Patients finance their dentistry with their own money, *not yours* when you use the DENTIST'S FINANCIER. When patient is discharged you have been paid in full. An ideal arrangement. Relations remain amiable.

Complete information and suggestions will be forwarded upon receipt of five dollars.

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P. O. Box 444, Chicago, Illinois  
Please send further information regarding  
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Enclosed find  Check  
 Money order for Five Dollars

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Equip your office with a Justrite Sanitary Waste Pail. Used by thousands of dentists as standard Office equipment. Opens with the foot. Closes automatically.

Booklet on Request.  
Order from your dealer:  
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## The Triumph of Rubber

# GUM LYKE

*Not an untried or Experimental product. The standard for years.*

All Progressive Laboratories and Prosthodontics make their dentures of American Dental Rubber with a facing of Gum Lyke, because the worth of a denture is in its ability to deceive—and Gum Lyke is a

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Have you tried our new shade and blend of Gum Lyke. If not send for a free sample specifying NATURAL GUM LYKE.

All Dental Dealers sell Gum Lyke \$2.50 the quarter pound.

### Makers of

Cleanlyke Cups and Discs with  
cleaning compound already incor-  
porated.

### Makers of

American Dental Rubber, a base  
rubber, light in weight, strong,  
tough and flexible. Made in all  
shades.

**Industrial Rubber Corporation**

LONG ISLAND CITY, N.Y.



# Pathfinders

Norman W. Kingsley  
*A Pioneer of Orthodontia*  
*Born in New York*

Among the many pathfinders in dentistry, Norman W. Kingsley stands out for his contributions to orthodontia and the correction of congenital deficiencies of the palate.

The pioneer in safe local anesthesia, which has meant so much to the more effective practice of dentistry, is

## \*NOVOCAIN\*

Introduced more than 20 years ago, this dependable original remains the standard local anesthetic.

*Novocain is supplied in tablets and ampules.*

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**LABORATORIES, Inc.**

122 Hudson Street  
New York, N. Y.

\*Trademark Reg. U. S. Pat. Off. Brand of Procain Hydrochloride.



Try a free sample of PUSTOLENE. For putrescent and abscessed teeth. 30 years' success.  
J. A. Sprague & Co., Columbus, Ohio

Dr. \_\_\_\_\_

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**Serves Best at LOW HEAT . .**  
Thereby assuring dependable and practically painless Temporary Fillings.  
Insist on PARAMOUNT TEMPORARY STOPPING it is The Gilmour  
Formulae, Founded 1902 . . "HANDMADE—for Correct Body." Full  
1 oz. Box 35c or 6 oz. Bottle \$1.75. At your dealers or direct

Free Trial Package on request.

DEANELL DENTAL SPECIALTY CO.

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#### IMPACTED LOWER THIRD MOLAR FORCEP

Good for 90% of the cases. Four models. Price \$7.50 each. Order through your dealer  
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Attractively tailored  
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Workmanship, material and  
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Our garments give dignity and  
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price \$3.50; three  
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White Poplin can  
be had in tan or  
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suiting, \$2.75 each  
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newest design spe-  
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ply Poplin — holds  
lustre and is of  
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can be had for  
\$5.50 per garment.  
This being a spec-  
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# Get the "Fear Complex" Out of Your Practice

Your patients may be suffering from a fear complex—the fear of pain. Not the pain of operation—they know you have conquered that—but fear of the dull, aching pain before and after the operation.

**Bayer-Tablets of Aspirin** will remove that fear absolutely and with safety.

Bayer-Tablets of Aspirin are the standard of effectiveness. For the sake of your practice, you can't afford to prescribe a substitute. They relieve pain without any depressing action on the heart.



# ASPIRIN

Aspirin is the trade mark of Bayer Manufacture  
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### Clover Leaf Vulcanizing Stone

A grey stone, especially developed to withstand heat. For highest quality vulcanite work.

In the Vulcanizer: Does not soften or disintegrate but holds both teeth and rubber in an unyielding grip insuring a dense, smooth, accurately fitting plate.

Speed: Separate in 20 to 25 minutes, ready to use within an hour.

Accuracy: Expansion less than 1 part in 50,000.

Hardness: Twice as hard as plaster.

Tensile Strength: 320 lbs. to the square inch (24 hour set).

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X STANDARD SET MODEL PLASTER

XX QUICK SETTING IMPRESSION PLASTER

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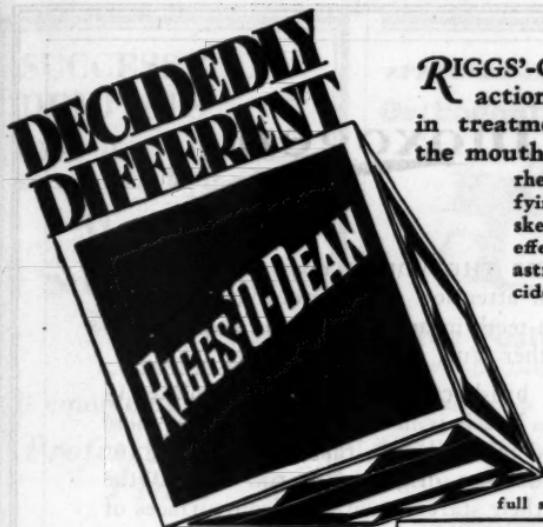
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To Doctor.....

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Not an ordinary prophylactic preparation. Riggs'-O-Dean . . . a formula perfected after years of intensive research . . . is acclaimed by thousands of users.

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**RIGGS'-O-DEAN** prompt action . . . particularly in treatment of diseases of the mouth, specifically Pyorrhœa . . . will prove gratifying . . . even to the most skeptical. It is assuredly effective as an analgesic, astringent, styptic, germicide and antiseptic.

**Non-Toxic**  
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We will gladly send you a full size bottle without charge.

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### WITH THE McKESSON APPARATUS



McKesson Small Tank  
Dental Unit

You can give 100% nitrous oxid and on the very next breath, 100% oxygen and the following inhalation any mixture of the two gases which is desired—so prompt and easy are the changes which the anesthetist can make with this apparatus. There is no delay in getting the new mixture to the patient, because the bags contain only pure gas, not a mixture of gases. The patient is never more than seven seconds behind in the effects which the apparatus is producing.

*Write for our Catalogue No. 16*

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## Dioxogen

**W**ASHING THE MOUTH does not receive as much attention as it should. Most people think clean teeth mean a clean mouth, but this is not altogether true.

A tooth brush cannot reach all the places in the mouth. Yet it is in these remote spots, those not touched by the brush, that danger lurks, for whatever diseases originate in the mouth, the germs get their start not on the clean surfaces of the teeth but in hiding places where they have a chance to develop.

People look to the dentist for advice and direction about care of the mouth, and a word from him about the importance of keeping the mouth clean would mean a great deal.

Dioxogen and water used as a mouth wash is unusually effective; the Dioxogen sterilizes, disinfects and cleanses better perhaps than any other agent that can be used. It reaches places never touched by a tooth brush, it is harmless and has an excellent effect on the gums and tissues.

A personal trial is the best proof of what Dioxogen does, and we will gladly send a free sample to any dentist not familiar with it.

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when they trim a den-  
ture sprinkle it with—

### Merritt's Super-Plate Powder

(LACTOGEN)

It completes the relief.

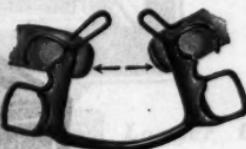
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### Give Positive Results

With Dr. Jackson 1906 to 1913

Send your models to me and be assured that you will be getting all the skill and ability worked into them that the "OLD MASTER" has passed on to his most ardent and devoted pupil.

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APPROVED THERAPY METHOD  
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Effective Results

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## We Make No Medical Claims for REVELATION

**R**EVELATION TOOTH POWDER *will not* overcome or cure any pathological condition of the mouth, remove tartar, disinfect or sterilize the mouth.

The only thing REVELATION *will do* or in fact the only thing any dentifrice can *safely* do, is to keep clean teeth clean.

Teeth on which tartar has formed, need to be scaled and cleaned by a dentist. Then REVELATION, when used regularly, will desolve gelatinoid, the nucleus of further hard deposits and will overcome fermentation around the necks of the teeth.



REVELATION is of an alkaline reaction and it produces a copious flow of saliva.

There is no grit, glycerine or other harmful ingredient in REVELATION.

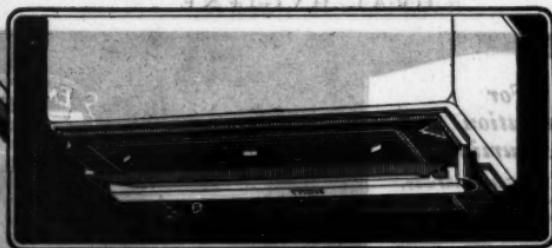
REVELATION will clean teeth safely and you can suggest it without reservation knowing full well that no harm can be done by its use.

Send your card now for full size can of Revelation, without charge, for testing purposes. We are now supplying small samples of Revelation Tooth Powder for dispensing purposes. Designate whether trial can, samples or both are desired.

## Revelation for Teeth and Gums

Never in paste form

AUGUST E. DRUCKER CO., 2226 Bush St., San Francisco, Calif.



#### Faster Heating

Contrast the heating surface of the Pelton "all-over" element with that of the old-fashioned element used in some "modern" sterilizers. No wonder the Pelton heats faster.

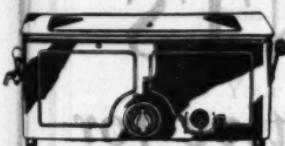


#### Longer Life

Spreading the same amount of current over nearly 3 times the area naturally reduces the wattage or current load per square inch. This lessening of strain means longer, trouble-free service.

## This Oversize Heating Element makes a faster, safer Sterilizer

Of course the Pelton Thermatic is a time saver, for its "over-all" element heats all water at once . . . But it also means that there are no pockets at the corners of the boiler in which water does not boil—a common danger with the old element which heated only a small space in the center of the boiler . . . In the Pelton Thermatic, *all* the water boils *all* the time . . . And although the heating surface of this element is nearly 3 times greater, yet its current consumption is unchanged . . . Current load per square inch is thus enormously reduced, and this lessening of strain means extra years of service . . . The Pelton Thermatic offers more for your money in Speed, Safety and Durability . . . When you need a new Sterilizer, invest wisely in its proven protection.



## PELTON STERILIZERS

THE PELTON & CRANE CO.



DETROIT, MICHIGAN, U. S. A.

**For**  
**Examination and**  
**Transillumination**

EMVALITE *lights the way,*  
*simplifies dental efficiency,*  
*locates more work and saves*  
*time.*

Making history in dental  
 progress—all down through  
 the periods of improved  
 equipment there has never  
 come a more generally use-  
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A little lamp of brilliant  
 intensity, designed to even  
 surpass more expensive  
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The complete outfit, in-  
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*From your Dental Supply  
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## Always effective for all uses

*Harvard* *CEMENTS*

L. A. & W. H. Thoenebe, Sole Agents for U. S.  
 1513 N. 13th St., Philadelphia, Pa.

At reliable Depots.

# THE ABSURDITY

of keeping the oral cavity hygienically protected through using a germicidal mouth wash may appeal to some but if it is salutary in the mouth, why not in the nose? The answer is that the sensitive membrane of the nose will not stand the abuse that the tougher membrane of the mouth will—but why abuse the mouth? Why not cooperate with Nature by using something more akin to body fluids?

## ALKALOL

You will never really know Alkalol until you try it in your own eyes or nose where it promptly demonstrates the soothing, cleansing action it would have on disturbed mouth tissue.

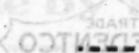
Your card will bring liberal quantity for personal use and we solicit your trial.

For sale by all Dealers

*The*  
**ALKALOL**

*Co.*

**TAUNTON**  
**MASS.**



**Mall the Coupon** —

**ALKALOL COMPANY,**  
Taunton, Mass.

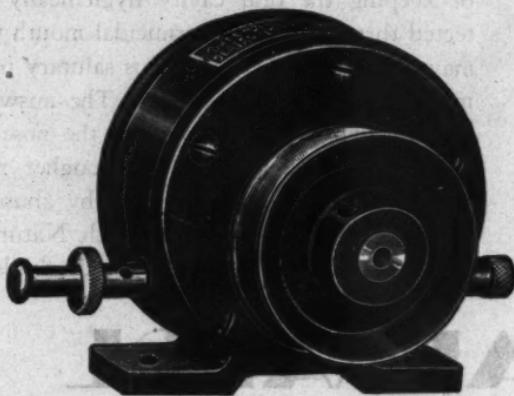
Gentlemen: Please send samples of **ALKALOL**.

Dr. \_\_\_\_\_

Address. \_\_\_\_\_

OH-M

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## Buffdentco Rotary Blower *Supplying air for the laboratory*

Price \$12.00 with belting and hook.  
Pulley to fit laboratory lathe, \$1.00.



**Buffalo Dental Manufacturing Co.**  
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## COPPER AMALGAM

AMES COPPER AMALGAM was first introduced to the profession in 1890. The Ames Company was one of the first if not actually the first to make copper amalgam in this country.

This product has successfully stood the test of time. For over 35 years the profession has been using AMES COPPER AMALGAM and it surely could not retain its prestige all these years if the product had not proved entirely satisfactory in every respect.

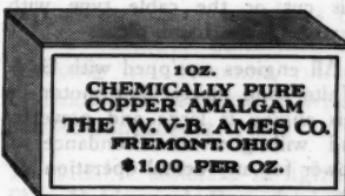
Great care is exercised in preparing AMES COPPER AMALGAM because the physical condition of the copper before amalgamation is the determining factor between a poor and a good amalgam. The materials are rendered free from all impurities and we are so confident that results will please you that your dealer will give you full credit in case you are not satisfied with results.

As a filling material, a liner for deep cavities, and for children's

teeth, AMES COPPER AMALGAM is definitely indicated.

Sold under the guarantee of satisfaction or your money back.

**Mail Coupon**  
**for FREE SAMPLE**  
**of AMES**  
**COPPER AMALGAM**



**For sale by all Dealers**

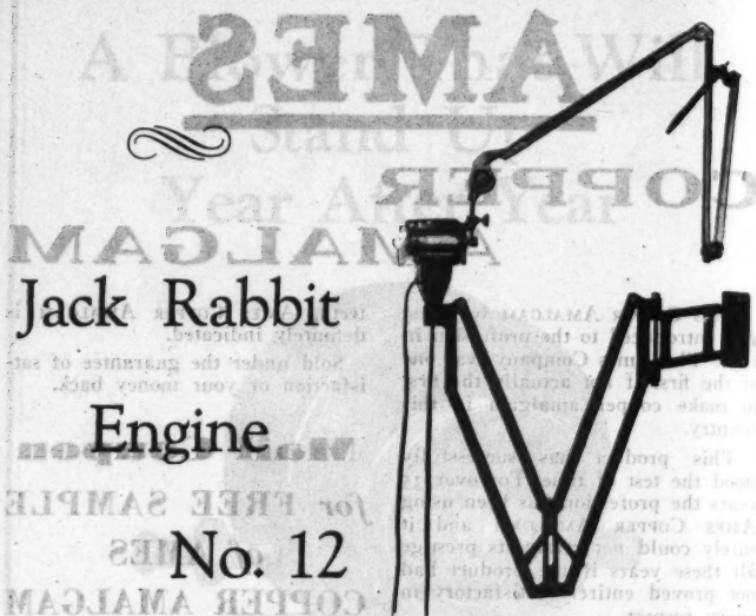
THE W. V. B. AMES CO., Fremont, Ohio.

Please send free sample of AMES COPPER AMALGAM.

Dr. \_\_\_\_\_

Address \_\_\_\_\_

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## Jack Rabbit

Engine

No. 12

COPPER ALUMINUM

This shows our new No. 12 Jack Rabbit Engine complete furnished in the all cord type as shown in this cut or the cable type with number seven hand piece.

All engines equipped with S. S. White hand pieces. The motor on this engine is large and powerful and will give an abundance of power for any dental operation.

We use a triple all cord arm, as shown in the illustration. The bracket is new in design and will give you over seven feet extension from the wall to the end of the hand piece. The bracket is furnished

in white, gray, mahogany and black Duco enamel. The price of the engine complete, as shown in this picture using S. S. White Doriot hand piece—\$100.00.

The cable type complete equipped with S. S. White's No. 7 H.P.—\$75.00.

We can also furnish the engine less the head and hand piece. (On this you can use your regular foot engine head.)—\$55.00.

Our complete catalog will show you the various types and styles of this engine along with a number of other articles we manufacture.

We will be glad to mail this to your address.

T. M. CRUTCHER DENTAL MFG. CO.  
BOX 686 LOUISVILLE, KY.



**Broach failure  
is a  
serious matter**

WHILE cleaning out a root canal is but one step in the filling of a tooth—it is probably the most important operation. Broach failure (breakage) at this time is a serious matter.

You can guard against accident (breakage) when doing this part of the work by using an ASKO BROACH.

ASKO BROACHES are made of tough wiry steel that enables them to do their work well, even at the very tip of the root canal and will stand the strain of being drawn out.

Hundreds of dentists wouldn't think of using any other broach.

Your dealer can  
supply you  
**\$5.00 per gross**

A. S. Koch & Sons  
Lancaster, Pa.

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SUCCUMB  
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Essential Oils**

Reports made by chemists to Pasteur Institute, Paris, show that the common forms of micro-organisms were killed in a short time when exposed to the evaporation of Essential Oils.

**G-O-S**  
(*Germicidal Oil Spray*)  
**Vapor Spray**

Is a combination of the most effective of these oils. It has a refreshing odor as well as being a valuable germicide for spraying living rooms, offices, bedrooms or any place where people congregate.

A valuable assistant in fighting Flu, Colds and Bronchial Inflammation.

**G-O-S Vapor Spray 4 oz. Bottle**  
With Atomizer - \$2.00  
Without Atomizer - \$1.00

Prepared by

**King's Specialty Co.**  
Fort Wayne, Indiana, U.S.A.

GERMS  
SUCCHUM  
**ECONOMICAL**  
*and Efficient*

**SODA** Bicarb., used as a dentifrice, will thoroughly clean the teeth *without injuring them*. Its natural "bitc" effectually removes film. Yet it contains no grit to wear away the surface.

Use Soda Bicarb. yourself and recommend it to your patients. A test will prove its worth.

When buying make sure of the best by specifying either Arm & Hammer or Cow Brand (Baking Soda). Both are Bicarbonate of Soda in its purest form, exceeding the U. S. P. Standards. On sale at all grocery stores.

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**KERR**  
REG. U. S. PAT. OFF.

# Perfection Impression Compound

**Softens Readily** **Hardens Quickly**

Working temperature between  
120° to 130°

Kerr Perfection Impression Compound is homogeneous in mass; fine in grain texture; highly adaptable to the tissues of the mouth when softened; neither warps nor creeps; and is free from flaking.



REGULAR CAKES

Kerr Perfection Impression Compound permits equal pressure on the stationary parts (hard and soft) and air-tight freedom for the moving muscles. The result is Relief (of hard parts) without Leak (on soft parts).

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DR. C. G. GOODSON  
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PROFESSIONAL SERVICES

3 1/4 x 6"

HANDY  
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500 \$1.98

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A grade of statement in general use. Neatly printed on a smooth writing bond paper, that is pleasing to the pen and eye. A size 3 1/4 x 6" requiring no folding to fit any envelope. Containing your name, address, and phone at the above low prices. Bound in pads of 100 each. A bargain impossible to obtain elsewhere at twice the price.

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AMERICA'S ONLY DENTIST'S STATIONERY SUPPLY HOUSE

# TEN DAY FREE TRIAL

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### Gutta Percha STOPPING



Supplied in round stick form, one ounce to a box or six ounces to a jar in all-white, all pink, all-ecru (tooth color); also assorted pink and white, and special assorted pink, white and ecru.

**PRICE,**  
per jar, \$1.50

**Send Coupon Today for a Trial Jar**

**CRESCENT DENTAL MPG. CO.,**  
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Send me one jar of Crescent Gutta Percha Stopping postpaid; within ten days of receipt I agree to return the unused portion to you, if I do not like it, otherwise you may charge through my dealer.

White     Pink     Ecru     Assorted     Special Assorted

My dealer is: \_\_\_\_\_ Doctor: \_\_\_\_\_

Address: \_\_\_\_\_



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FISCHER  
“DENTALX”**

**A TRULY GREAT NEW X-RAY UNIT**

*Save Money, Get the Facts Today.*

Accurate, fully automatic. Timer-Circuit Breaker affords full protection to both operator and patient.—Heavy Transformer and Coolidge X-Ray Tube means full efficiency and assurance of perfect results.

Price Completely Equipped only \$595.

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and mail coupon  
today**



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of Buffalo,  
N. Y. says:**

H. G. Fischer & Co., Inc.  
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*Gentlemen:—*

I have your “DentalX” machine and want to say that it does all that you claim. I am more than pleased with my purchase, not only with the machine, but with the money saved through purchasing a Fischer—a saving of about \$400.

I have operated most every machine on the market but none of them are any more simple or accurate than yours. For the money, I think you have the best buy on the market. Put me down as one of your boosters.

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CONCENTRATED FOR THREE REASONS



## YOUR PATIENTS

### *Should Be Told These Facts*

"Concentrated for three reasons" is an ASTRING-O-SOL fact of special interest to dentists and their patients.

(1) Concentration makes possible ASTRING-O-SOL'S effectiveness in the treatment of many mouth-and-gum disorders. (2) It permits dilution at the chair to please individual tastes. (3) And it accounts for ASTRING-O-SOL'S germicidal action when used full strength on the tooth brush.

**FOR MOUTH  
AND THROAT**

**DOES  
MORE!  
COSTS  
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Sydney, Australia

DETROIT, U. S. A.

Windsor, Canada

Patient Types . . .

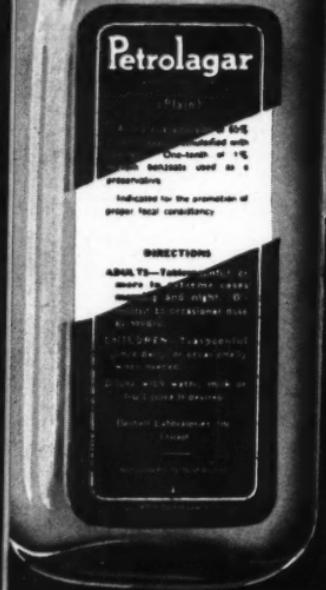
### The Elderly Patient

It is often a task to keep an elderly patient in active service. Constipation may be the borderline between invalidism and good health. Cathartics are particularly harmful in such a case but Petrolagar and "Habit Time" will help the senile bowel to normal function.

## Petrolagar



# Why an emulsion



Deshell Laboratories, Inc.,  
36 Lake Shore Drive, Chicago

Gentlemen: — Send me copy of the new  
brochure "HABIT TIME" (of bowel move-  
ment) and specimens of Petrolagar.

Dept. O.H. 3

Dr. ....  
Address .....

**P**etrolagar affords a valuable aid to diet and exercise in bringing about a restoration of normal bowel movement — the effect being purely mechanical.

Petrolagar simply acts by permeating the intestinal content to produce a soft-formed, yielding mass in the bowel.

Petrolagar has many advantages over plain mineral oil. It is more palatable; it easily mixes with bowel content with less danger of leakage and does not interfere with digestion.

Petrolagar is composed of 65% (by volume) mineral oil with the indigestible emulsifying agent, agar-agar.

## Petrolagar

## Solves Natural Gas Troubles!

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Torit No. 77-G  
\$10.50

St. Paul Welding & Mfg. Co.  
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## — DENTIST'S — Lubricating and Polishing Outfit

L & S Restores original luster to your equipment. The lubricant is particularly adapted to dental mechanisms and keeps metal parts bright.



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**L. & S. Laboratories**  
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HAVE your patients chew Milnesia Wafers for oral acidity. Each pleasant tasting wafer represents equal teaspoons of U.S.P. milk of magnesia. And chewing them forces tiny particles of magnesium into every crack and crevice of teeth and gums. Don't make your patients brave the chalky taste of milk of magnesia to get its benefits—let them try Milnesia. We'll be glad to send free office sample upon request.

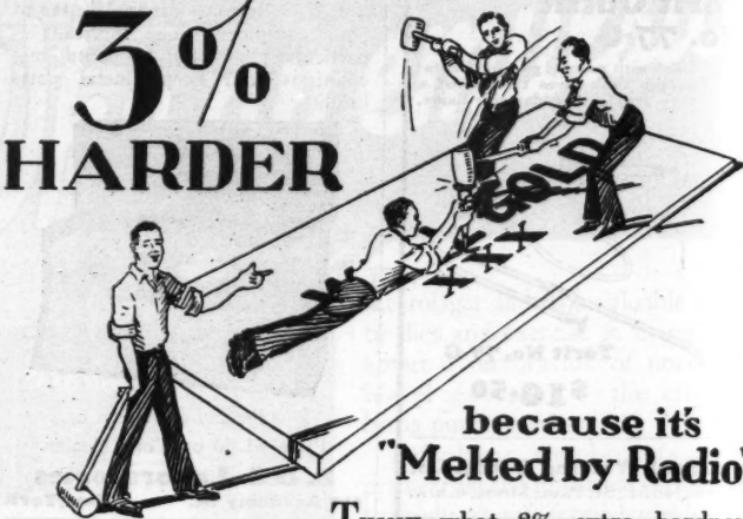
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MILNESIA LABORATORIES, Inc., 11 East 36th St., N.Y.

# WILL-GOLD XXX

## For Partial Removable Restorations

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**HARDER**



**because it's  
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Will-Gold XXX offers you 3% added hardness because it's "Melted by Radio." Repeated tests in the Williams Research Laboratories on a Rockwell Hardness Tester show that the XXX formula, melted by ordinary methods, has a hardness of 93 as compared with 96 when "Melted by Radio." Williams Physical Testing has conclusively proved that "Melting by Radio" increases all the other desirable properties of Will-Gold XXX making it the outstanding casting gold for Partial Dentures cast in one piece—bars, clasps, pontics and saddles.

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better because they are "Melted by Radio"



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Analgesic-  
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